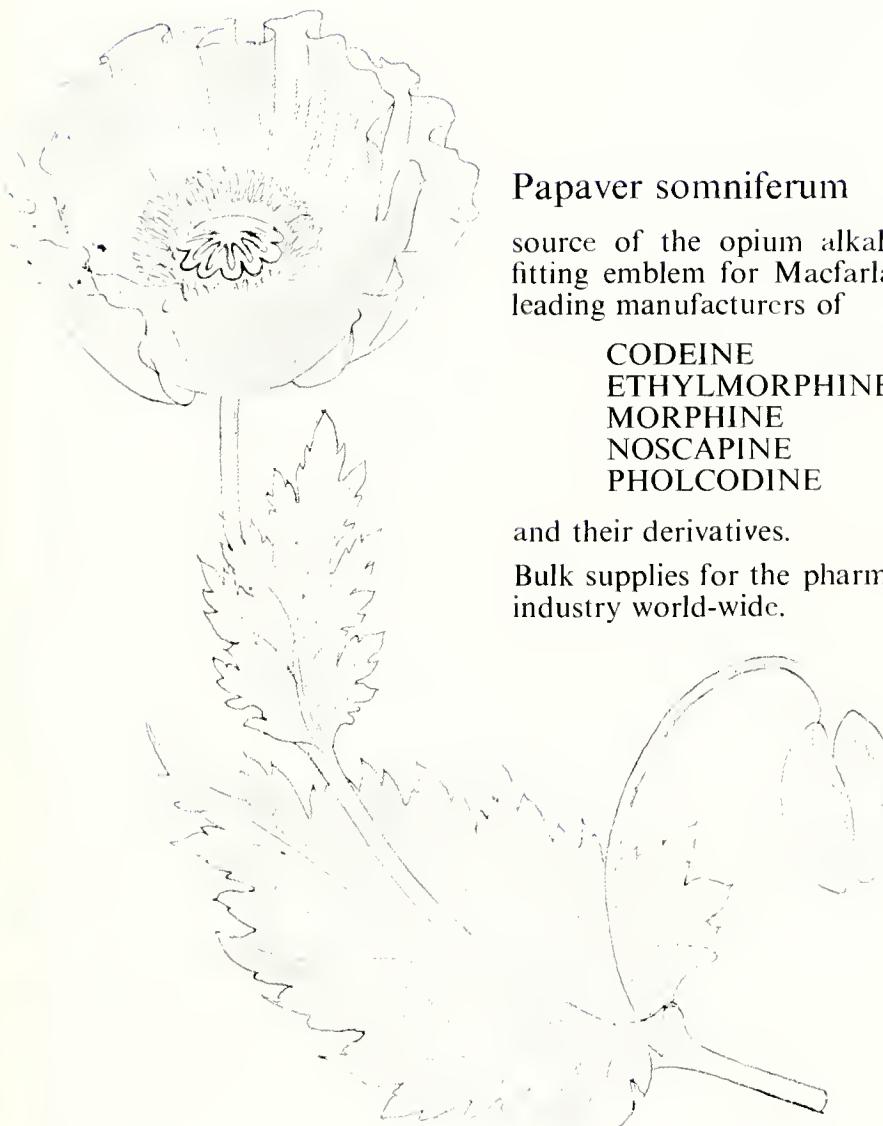


Chemist & Druggist

9 June 1973

THE NEWSWEEKLY FOR PHARMACY



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The newsweekly for pharmacy

114th year of publication

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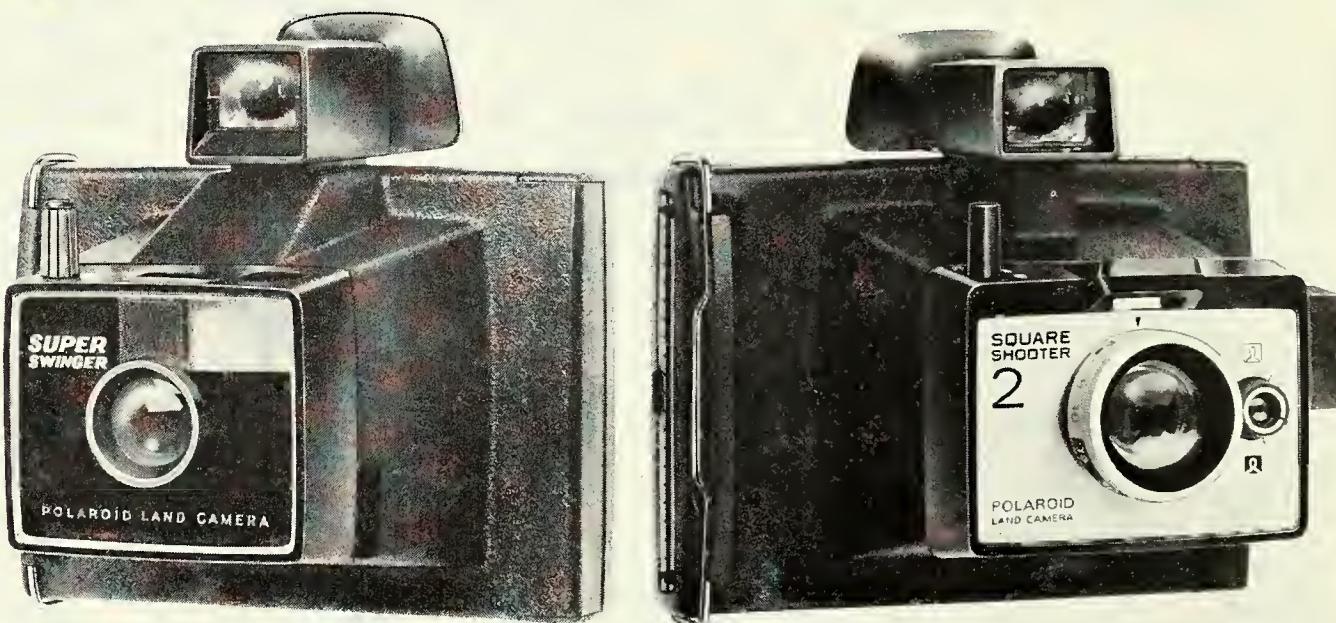
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Professor E. F. Scowen is knighted in the Birthday Honours' List (see p746).

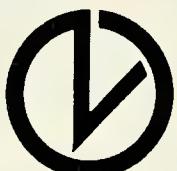
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D. E. Sparshott is Society's president

Mr D. E. Sparshott has been elected the new president of the Pharmaceutical Society of Great Britain in succession to Mr J. P. Kerr.

Elected to Council in 1964, Mr Sparshott was formerly chief pharmacy superintendent of Boots Ltd and is a former member of the Central NHS (Chemist Contractors) Committee and of the Poisons Board. He was the Society's vice-president in 1969-70 and has been a member of the Statutory Committee since 1969.

The vice-president for a second term is Mr C. C. B. Stevens; Mr H. Steinman is re-elected treasurer.

Five elected to industrial subcommittee

The election for five members of the Pharmaceutical Society's Industrial Pharmacists Group to serve on the Industrial Practice Sub-committee, has now been completed. Votes were as follows: D. I. R. Begg 145, L. G. Brookes 165, J. A. Edwards 51, B. A. Forder 111, A. R. Longworth 166, Miss J. Parker 108, R. A. Ramsay 123, D. J. Ringshaw 97, E. K. Samways 179, N. Santer 51, A. G. Shaw 253, F. M. Simons 128 and A. Stephenson 55.

Mr Begg, Dr Brookes, Dr Longworth, Mr Samways and Mr Shaw have been elected to the Subcommittee for a period of two years.

Of the 624 voting papers sent out, 422 were returned of which 32 were invalid.

Chemists to join in anti-smoking campaign

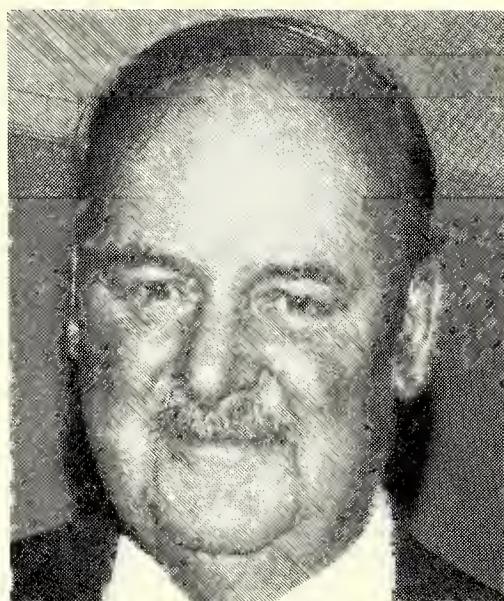
Chemist contractors are to be asked to cooperate in publicising the nicotine and tar content of various brands of cigarettes, as determined by the Government Chemist.

The Central NHS Committee is supporting the view of the Secretary for Social Services that the planned anti-smoking publicity campaign will be greatly helped by pharmacists' participation. Contractors will be able to obtain a poster and are asked to make leaflets available to their customers.

Dial-a-pollen-count

The pollen count for hay-fever sufferers in London and the Home Counties has been started by the Asthma Research Council. Sufferers in the area can obtain daily pollen counts and further outlook forecasts from morning and evening papers and also on the telephone by dialling 01-246 8091.

In view of the lower than average temperatures in April and May, the Council estimate that the pollen season will be



Mr D. E. Sparshott

milder and shorter than usual. The pollen count is expressed as the number of pollen grains per cubic metre of air averaged over a period of 24 hours. When the count is high, 50 or more, many hay-fever sufferers will experience severe symptoms, but when it is low, below 10, sufferers are less likely to be troubled.

About 3 million people in Britain suffer from hay fever.

Call for delay in EEC responsibility decision

Discussions on the need for industrial pharmacists to take personal legal responsibility for the quality of medicines produced by their companies should be postponed until there is agreement on harmonisation of qualification.

That suggestion was put forward by Mr J. P. Wells, MPS, director of the Proprietary Association of Great Britain, when he led a delegation from the European proprietaries industry in a meeting at Strasburg with members of the Commission on Public Health and Environment of the European Parliament last week.

It is believed that Mr Wells' proposal is in line with UK thinking, with the Royal Institute of Chemistry among those opposing adoption of pharmacist control (required in some continental countries) as a basis for the EEC directive. The Pharmaceutical Society, on the other hand, has supported the principle.

In his paper on the right of establishment in the pharmaceutical field, Mr Wells discussed other problems arising from draft directives including geographical distribution of pharmacies, pharmacist monopoly of the sales of medicines and the requirement to abolish corporate pharmacies. He

suggested that these requirements were not critical to the free interchange of medicines between one member state and another and possibly exceeded the intentions of the Treaty of Rome.

Dr Dieter Spitta, legal adviser to the European Association, referred to testing criteria and stressed that the strict procedures required for new substances with unknown effects should not be applied in the case of old and well known substances used in proprietary medicines.

Glasgow fears over contraceptive dispensing

Glasgow pharmacists are concerned at a possible reduction in the dispensing of contraceptives at pharmacies near to family planning centres in the city.

In an attempt to assess the extent of the problem the Local Pharmaceutical Committee is asking pharmacists in its area whether the volume of such prescriptions has been reduced at their pharmacies in these circumstances.

Advice on contraception and contraceptive supplies are available at 19 child health centres in the city, and at clinics operated by the Family Planning Association as a voluntary agency.

Chemicals Training Board to reduce levy

The Industry Training Board for Chemical and Allied Products intends to reduce its levy from 1·0 per cent to 0·75 per cent for the 1973-74 levy later this year. Subject to Government approval it also hopes to make a further reduction in late 1974.

The reduction in the 1973-74 levy will be accompanied by an increase in the exemption limit for small firms from £50,000 to £80,000 a year emoluments, equivalent to approximately 50 employees. Due to the Board's method of rebating the levy, firms with more than 50 employees will enjoy considerable levy relief and only above 400 employees will the levy paid begin to approach the full figure.

DITB levy approved

The Secretary for Employment has approved proposals submitted by the Distributive Industry Training Board for a levy on employers within the scope of the board equal to 0·7 per cent of their payroll in the year ended April 5, 1973. Each employer's total payroll is to be reduced by £3,000 before assessment. Employers whose total emoluments are less than £8,000 or who have less than 10 employees on April 5, 1973 are to be exempt.

Fat baby problem

"The problem of overstuffed, calorically overdosed, obese babies is becoming a real, unnecessary and avoidable public health problem of immediate concern in infancy and with long-lasting ill effects."

That is the conclusion reached by Dr D. B. Jelliffe, University of California, Los Angeles, in a letter to last week's *British Medical Journal*. He feels that the present vogue for feeding cow's milk plus early semisolids, often in the first weeks of life, can only result in obese babies.

Three pharmacists honoured in Birthday List

Three practising pharmacists have been made OBE's in the Birthday Honours List. They are Mr J. C. Bloomfield, Mr G. T. M. David and Mr J. B. Lloyd.

Mr Bloomfield, FPS, is a proprietor pharmacist in Portsmouth. Since qualifying in 1940, he has served a number of terms on the Pharmaceutical Society's Council and was president in 1965-66. A member of the Poisons Board, he is also a member of the Advisory Council on the Misuse of Drugs and Portsmouth Executive Council. He was the founder president of the British Society for the History of Pharmacy and is now the professional secretary of the International Section for the General Practice of Pharmacy in the Federation Internationale Pharmaceutique as well as a council member of the FIP. Mr Bloomfield's award is for service to pharmacy and the NHS.

Mr David, FPS, JP, chairman of the Central NHS (Chemist Contractors) Committee, has been a member of the National Pharmaceutical Union Executive Com-

mittee for the past 20 years and was chairman 1959-60. He has been a member of the Joint Pricing Committee for Wales since 1962 and the Swansea Pharmaceutical Committee for the past 24 years. A proprietor pharmacist, Mr David qualified in 1934.

Mr Lloyd, FPS, chief pharmacist, United Manchester Hospitals, qualified in 1931 and was awarded his FPS in 1966. He served on the council of the Guild of Hospital Pharmacists 1948-54 and was awarded the Evans Medal for 1961. A member of the Manchester Regional Hospital Board's technical advisory panel in pharmacy, he has also served three terms on the Standing Pharmaceutical Advisory Committee as well as being a member of "Linstead" (1951-55) and "Aitken" (1955-61) committees. He was the first chairman of the Association of Teaching Hospital Pharmacists.

Other awards include a knighthood for Professor E. F. Scowen, chairman of the Committee on Safety of Medicine, and an OBE for Mr H. M. Lightfoot, Victoria, Australia, for service to the blind and the pharmaceutical industry.

Skin disorders a frequent cause for self-medication

Skin preparations are to be found in a higher proportion of homes than any other type of medicines, with the exception of analgesics.

"Skin disorders", a report published this week by the Office of Health Economics, quotes a survey in which 48 per cent of households kept "simple skin creams" such as balms, oils, antipruritics and local anaesthetics at the time of interview and 54 per cent had "other skin creams" including those with a more specific pharmacological action.

Mr Lloyd



Above, Mr Bloomfield. Below, Mr David.



Another survey showed that of the estimated 22 per cent of people who had experienced symptoms of skin complaints in the previous two weeks, about one-half had treated themselves and about one-sixth had taken medication prescribed by a doctor.

The report states that skin conditions account for 7 per cent of the cost of general practice and 9 per cent of the cost of prescribed medicines. Skin products also account for approximately 10 per cent of self medication, although in practice it is difficult to distinguish whether products are used for cosmetic or medicinal purposes eg medicated shampoos.

Although major advances in treatment of skin diseases have taken place with the introduction of antibiotics, halogenated corticosteroids and anti-fungal compounds there are still some relatively common non-infective conditions, eg, psoriasis where no really effective treatment exists. The report anticipates important advances in immunosuppressive therapy and in the development of prostaglandins.

Skin preparations present problems

"Although so much can go wrong in dermatological formulation, our patients do nonetheless, still get better. With a little more attention to details here and there, more of them might improve more quickly", said Mr A. P. Launchbury at the Royal Society of Health's Pharmaceutical Group meeting last week. The speaker is pharmaceutical adviser to Pharmitalia.

Speaking on "Some pitfalls in dermatological formulation", Mr Launchbury began with incompatibility problems which may be due to hydrogen bonding interactions, anionic-cationic interactions, or pH-change mediated incompatibilities.

Another "pitfall" is bacterial growth which, unlike fungal growth, is not immediately obvious. Mr Launchbury stressed the need to limit contamination during manufacture rather than to rely on a preservative to "clean up" a microbiologically dirty preparation. The choice of preservative also presents problems: many tend to be more oil- than water-soluble and migrate into the oily phase, and phenolic and cationic preservatives tend to complex with surfactants. He recommended using at least two preservatives with different physico-chemical properties.

Further problems arise when steroid preparations are diluted with w/o creams which contain no preservative in the aqueous phase and the oily part absorbs preservative out of the steroid cream's aqueous phase.

Turning to skin reactions, Mr Launchbury mentioned the high incidence of sensitivity to lanolin and parabens. He concluded that if the patients' dermatoses did not resolve on repeated changing of preparations the possibility of sensitivity to one of the commonly used ingredients should be considered.

Grocers to appeal

The National Grocers' Federation is to make representations on "anomalies" and the pack size restrictions of aspirin and paracetamol in the General Sales List. The "anomalies" includes variation in dosage and content of analgesic and cold remedies in sachet and tablet forms.

Chemists to help doctors over Misuse Act scripts

Advice to doctors on their obligations under the Misuse of Drugs Act is being prepared by Mallinson House. It will be issued in the form of a letter which chemists can supply to local doctors, either by the Central NHS (Chemist Contractors) Committee, or by the National Pharmaceutical Union.

The letter is being produced in response to chemists' fears that many doctors will be unaware that it is a criminal offence to issue an incomplete prescription when the Regulations come into force on July 1.

It will include both the requirements for the prescription and a list of controlled drugs including proprietaries.

...and Central Committee provides a 'check list'

The Central NHS (Chemist Contractors) Committee is to provide chemists with a "check list" of prescription requirements under the Misuse of Drugs Act 1971.

At the Committee's May meeting, it was pointed out that under the regulations to the Act it would be a criminal offence for a pharmacist to dispense a prescription that had not been properly completed by the doctor in his own handwriting. In order to overcome any problems that might arise from a prescriber failing to complete a prescription for controlled drugs in the prescribed manner, the Committee decided that the "check list" should be supplied together with an initial supply of printed slips addressed to doctors, worded so as to inform them why a prescription did not comply and to request the necessary amendment before dispensing.

It was felt by the Committee that, as it would be illegal for a prescription to be dispensed before it was amended, it would be necessary for the slip to be handed to the patient together with the prescription in every case so that the matter could be corrected immediately.

No reply on security grant

The Committee was told that a reply was still awaited to the claim for a £50 grant towards the cost of installing the special cabinets required under the Act for safe keeping of controlled drugs.

It was reported that, in accordance with the decision taken at the April meeting of the Central Committee, the draft scheme for the constitution of the Area Chemist Contractor Committees under the reorganised NHS had been submitted to the Department of Health. The Committee also approved draft constitutions for the Regional and the Area Pharmaceutical Advisory Committees.

A letter had been received from the Pharmaceutical Society suggesting that there should be an additional pharmacist member of staff at area level with wide

experience of general practice. The Committee shared the view and would support representations to the Department.

In reply to representations by the Committee the National Association of Pharmaceutical Distributors had notified its members' intention of charging the reduced prices for Librium and Valium from May 21.

Wholesalers to charge doctors makers' prices

A letter had been received from the NAPD stating that from May 14 its members would be pricing dispensing doctor invoices at prices published in the manufacturer's latest lists. The Committee was concerned at the effect on rural pharmacies of this development which had been brought about by distributors, who were not NAPD members, supplying at discounts varying between 20 per cent and 33½ per cent. The letter pointed out that the Department of Health had been informed of the decision.

Now that invoices were required to be retained for VAT purposes, pharmacists had registered objections to sending them to pricing bureaux in support of claims for appliances, etc. The matter was being looked at by the Department and advice on future procedure would be forthcoming.

Further consideration was given to mileage allowance for pharmacists called out to dispense prescriptions marked "urgent". It was agreed that a memorandum on the whole subject of payment for

prescriptions dispensed out of hours should be prepared by the office for consideration at the next meeting.

The Committee's concern that the results of the ingredient costs inquiry were still awaited would again be conveyed to the senior officer involved at the Department. During the discussion it had been pointed out that the volume of work involved was greater than in any other inquiry and that there was no precedent for a study of this magnitude.

A reply to the Committee's representations about the desirability of all vaccine supplies being channelled through pharmacies had been received from the Department. It pointed out that the involvement of general practitioners in vaccination programmes was not part of their services under Part IV of the National Health Service Act and that it was not anticipated that the forthcoming NHS reorganisation would alter the position. It was decided that the Department should be informed that the Committee could not accept the contents of the letter.

Concern was expressed at the increasing numbers of prescriptions being returned by pricing bureaux for elucidation. It was agreed that pharmacists would be reminded of the importance of endorsing prescriptions before submission. Consideration was also given to the possibility of producing standard letters for pharmacists to attach to forms EC10 for return to the prescriber.

'Urgent consideration' on rural dispensing

It was reported that a meeting had been held with officers of the Department of Health on May 8 concerning dispensing in rural areas. A letter had been received from the Department confirming that further and urgent consideration was being given to the Committee's representations.

It was noted that the first meeting of the Oxygen Working Party set up in accordance with Recommendation 8 of the Working Party on Pharmaceutical Services had been arranged to follow the meeting.



Mr E. Hodgson is presented with the Unichem golf trophy by Mr C. Griffiths, a director of Unichem (Northern) Ltd. In the competition, organised by Leeds Chemists Golf Society, all competitors received a golf ball inscribed "Win with Unichem".

Company News

Weston Pharmaceuticals sales top £36m

Sales of Weston Pharmaceuticals Ltd in the year ended February 28 reached £36.1m and group profits, before tax was £1.78m. Last year the figure was £495,000 but that was before the acquisition of Barclay & Sons and Berthram Griffiths. Taking those into account the comparative figure would be £1.23m. Earnings per share were 8.1p (5.67p) and final recommended dividend is 13.5 per cent net equivalent to 19.28 per cent gross. Total dividend for year should be 27.28 per cent.

The directors report that all divisions had an excellent year although the full benefits of rationalisation of Westons and Barclay will not become fully apparent until the coming year.

The group now have 197 retail stores and 23 wholesale branches.

Sangers maintain profit improvement

Group profit of Sangers Ltd, before tax, for the year ended February 28, at £1,561,184 was up by £346,324 on the previous year. Net profit after tax is up from £720,302, to £933,115.

The directors recommend a dividend of 19.11 per cent, which after taking into account the new imputation tax system, makes a total effective gross distribution of 27.3 per cent for 1973 compared with 26.0 per cent for 1972. The profits of the Group which are again a record, justify a considerably larger distribution were it not for the restrictions under the Counter Inflation Act limiting dividends, the directors add.

It is anticipated that subject to unforeseen circumstances, the results for the year to February 28, 1974 will show an improvement on the present profit and subject to Government legislation there will be a "substantial" increase in the dividend.

Glaxo to sell off Murphy Chemicals

Glaxo Holdings Ltd are to sell off their wholly-owned subsidiary, Murphy Chemical Ltd, to a French bank acting for Pepro SA, a European company specialising in the agricultural chemical field.

Subject to the various official consents being given, it is expected that the book value of the net assets of Murphy Chemical will be about £1m and the turnover for the year ending June 30 will be about £2.9m.

Briefly

Pennwalt Pharmaceuticals UK has been formed by Pennwalt Corporation of Philadelphia, USA, as a division of S. S. White Ltd, 32 Clarendon Road, Harrow, Middlesex HA1 1BL.

Rhone Poulenc had a consolidated net profit in 1972 of Frs. 284.6m. Cash flow in 1973 should be up by 15 per cent on 1972 and turnover by 11 per cent.

Yardley of London Ltd: Mr Peter Rayworth has joined the company as marketing manager for their beauty treatment and cosmetic ranges. Mr Rayworth is a member of the Institute of Marketing, and has a degree in chemistry from Hull University.

Gillette Industries have appointed Mr G. Robson their southern regional sales manager.

J. Waterhouse & Co Ltd have appointed Mrs B. Boardman an additional representative for the Greater Manchester area, as from June 1.

Ortho Diagnostics have appointed Mr R. Pearce their product development manager and M. Ringrose, product manager.

Lords delay opinion on Roche petition

The House of Lords Special Orders Committee completed its hearing last week of the petition by Roche Products Ltd and its Swiss parent over a Government Order requiring them to reduce the prices of Valium and Librium (*C&D*, May 19, p662). The petition says the Order should be considered by a Select Committee which could quash or uphold it.

After five days of submissions from the company and the Trade and Industry Department, the Committee, chaired by the Earl of Listowel, deferred its decision until June 8.

Mr Kenneth Jupp, Q.C., for the Trade and Industry Secretary, said that if the Order went to a Select Committee there was a grave danger that they would be faced with "monumental amounts of evidence which was not what they were designed for".

The Monopolies Commission who found that "excessive" profits were being made by Roche was a "specially designed instrument for penetrating the fog of accountancy, the playing off of figures internationally, which is so easy for the giants of international industry to indulge in". If Roche thought that the Commission's pronouncement was contrary to the rules of natural justice then they must challenge that in the Courts.

Mr Richard Yorke, QC, for Roche, said the Trade and Industry Secretary could now go on saying he would not discuss the Order on prices with Roche until they had paid him the alleged £11m in excess profits, and there was no way Roche could change his mind. "We say that on this occasion for reasons we do not understand the Commission have made a hopeless mess of the reference to them. The conclusions

of the Report have never been dealt with at all. The matters I am complaining about have been so badly dealt with that further inquiry into them is necessary if justice is to be done."

Earlier Mr Jupp claimed that Roche got a margin of just over £1m on sales of just over £2m and the Commission said that that was not a bad margin to cover promotion, research and overheads.

Mr Jupp went on: "It may be that after having milked these drugs of excessive profits for 13 years with Librium and 10 with Valium, there need be no profit. The commission say the question of what rate of profit should be allowed in determining a fair price becomes barely relevant since the group has already obtained from the sale of these drugs profits far in excess of what is justified."

Every other firm except Roche had its prices controlled by the Voluntary Price Regulations Scheme and had to satisfy the Social Services Secretary that the prices were acceptable to him. In the implementation of the scheme eight companies, including Roche, had failed to give full figures.

Government investigations, however, had shown that with all but two of them, the profits were "reasonable".

The two were currently engaged with the Department in "meaningful negotiations" in an effort to bring their level of profit under control.

He then referred to difficulty in getting certain information from Roche. "No doubt Roche hoped that they would make it impossible for the Commission to come to any conclusion and arrive at any fair price. But the Commission refused to be defeated."

Overseas News

Tighter control on barbiturates

Tighter control for nine barbiturates in America are recommended by the US Food and Drug Administration to the Bureau of Narcotics and Dangerous Drugs. Currently, the drugs are regulated under Schedule III of the Controlled Substances Act and the recommendations would mean moving them into Schedule II, making them as tightly controlled as amphetamines and morphine. The move would mean that there would be an annual limit on quantities manufactured, the keeping of accurate records of sale or use, and no repeats on prescriptions.

Three of the sedatives—amobarbital, secobarbital, pentobarbital—are among the ten most abused drugs in the United States. The remaining six are butabarbital, cyclobarbital, heptabarbital, probarbital, talbutal and vinbarbital.

□ A correspondence course for practising pharmacists to enable them to "reassure" patients is on sale in Australia and New Zealand. It was developed by the New South Wales Pharmaceutical Society based on undergraduate lectures about diseases and their management.

People

Topical reflections

BY XRAYSER

Professional surroundings

D. Currie, OBE, FPS, Foresthall, Ringburn, Glasgow has been appointed to serve on the new area health board for Glasgow.



Mrs H. Butler, retiring president of the Society of Cosmetic Chemists of Great Britain investing Mr G. A. C. Pitt, MSc, RIC, as president for 1973-74. The vice-president for the year is Miss A. E. Young, Pharm, MPS.

Deaths

Daly: On May 16, Mr Patrick Daly, Lodge, Hospital, co Limerick. Mr Daly qualified as a pharmacist in 1918 and retired from practice a number of years ago.

Hains: Suddenly, on June 3, Mr Les Hains, ICAM, M.Inst.M., marketing manager, K Ethicals Division of Syntex Pharmaceuticals Ltd, aged 37. Mr Haines suffered a fatal heart attack at his home in Bracknell, Berks. Before joining Syntex in 1966 he was with the advertising department of Iaxo Laboratories Ltd, the advertising agency Intercon International and the Beecham Group.

Thom: On May 28, Mr William Edward Thom, MPSI, Clanaboy, 7 Westfield Road, Dublin, aged 59. Mr Thom qualified in 1938 and conducted his own pharmacy at 51 Lower Kimmage Road, which he inherited from his late father, Mr R. M. Thom. Born in Cookstown, co. Tyrone, Mr Thom spent some years as a child in the Isle of Man but went to Dublin in the 20's when his father purchased the pharmacy in Kimmage in 1925. Mr W. E. Thom was a well-known optician. A third generation of the family carries on the pharmaceutical tradition, the deceased's son, Mr Neville Thom, being a BSc (Pharm) who is also studying optics, while a daughter, Mrs Hilary Buttimore, is a qualified Assistant.

Although the meeting of Branch Representatives did not arouse a great deal of enthusiasm, I make no apology for returning to some of the topics discussed. It might seem to some, for example, that the efforts of Mr J. Bolton, of Finchley, to encourage general practice pharmacists to give a professional appearance to their pharmacies are comparatively trifling. But I think the subject he raised is one of crucial importance and I heartily support him in his view. One may still be competitive in dignified surroundings.

My own views on that have frequently been expressed in this column. Yet I see constant inroads being made on traditional standards of appearance, and I cannot help contrasting what I see with the almost severe restraint in France and Holland, for example. Miss C. Morgan, who recently gave a talk on her experiences in France, said that pharmacy seems to be less professional than in Britain, but she also reported that pharmacists in France are respected members of the community and that the salaries paid are very much higher than those here.

Incidentally, Miss Morgan made reference to an unemployed man handing over £65 for his prescription. I had been under the impression that in cases of need the medicine could be obtained without meeting the charges, which the chemist could recover later from the Social Security direct. That may have altered but it was so a few years ago.

To return to the Branch Representatives, I have every sympathy with them—the canvas of pharmaceutical problems is too wide at the present time. In the course of another year there may be more to bite on.

Thirty per cent

Three in every ten exercised their right to vote in the election of the Council of the Pharmaceutical Society. The other seven seem to be perfectly satisfied. But despite the small poll there is no shadow of doubt that those who voted are happy with the leadership of the president, Mr J. P. Kerr. It must be both gratifying and heartening to head the poll in his term of office.

I congratulate him on his success. He presides at a difficult time, bearing in mind the profession's problems. Pharmacy is fortunate in having such an able and forthright leader at this stage, and his handling of the meeting of Branch Representatives clearly illustrated his aptness for the job.

In general, the voting suggests that the electorate has confidence in the present Council, for only one change was made and the newcomer is returning to a fold he already knows. It will be for the Council now to demonstrate that that confidence is not misplaced. Decisions will have to be taken which will shape the pattern for all time.

News in brief

- A special NHS prescription form for condoms to be used by paramedical personnel such as health visitors has been advocated by the Birth Control Campaign.
- Southampton local medical committee are attempting to impose a voluntary ban in the Southampton area on the prescribing of Mandrax, according to a letter in last week's *British Medical Journal*.
- The Metal Box Co Ltd have received approval from the Prices Board to increase prices by approximately 8½ per cent on open-top cans and aerosols.
- Nearly £400 has been raised for the Imperial Cancer Research Fund by 91-year-old artist, Irene Craig, who is the daughter of Sir John Williams Benn, founder of the Benn Group, publishers of *C&D*. A collection of her views of the Thames and Italian scenes has been on view in the crypt of St. John's, Smith Square, London, and it is the proceeds from their sale that has produced the boost for the fund.

Professional News

Pharmaceutical Society of Northern Ireland

Subsidies may be needed for an adequate service

Some form of subsidy may have to be introduced for pharmacies in certain areas—that was the conclusion reached at the May meeting of the Council of the Pharmaceutical Society of Northern Ireland.

Referring to the Planned Distribution Committee's report, the president said the whole of the province, except the city of Belfast, had been considered ward by ward and an assessment made of the number of pharmacies required in order that an adequate pharmaceutical service be available to the public. Mrs Watson said the position in Belfast was giving cause for some concern. About ten pharmacies in and around her business had either already closed or would soon.

Mr Kerr said a committee had, four or five years previously concerned itself with the redevelopment plans of Belfast Corporation. Each pharmacy had been marked on a map of the city showing the areas where redevelopment would take place. He thought about 150 pharmacies would either be demolished or so blighted as to force proprietors to close. The number of pharmacies in Belfast had decreased from 267 in 1965 to the present 163—in most cases due to redevelopment.

In some redevelopment areas the population would not be re-housed nor the pharmacies replaced. In others health centres were being built and if there was no health centre pharmacy some would doubtless open around it. He thought the pharmaceutical service for Belfast should receive careful consideration but appreciated that the position in a particular area could change very rapidly. The president undertook to raise the matter with a committee of the Ulster Chemists Association and Mr Kerr was asked to renew his contacts with the planning department of Belfast Corporation.

Staffing difficulties

The number of new pharmacists required each year was discussed. The president pointed out that a planned service such as was suggested would reduce the number of pharmacies in Northern Ireland to around 400. At present it was difficult to find qualified staff and the Council would have to keep an eye on the register intake which at present was adequate, though in the years ahead an increase may be needed. Professor D'Arcy said all the places, twenty-five, available for first year students in the Department of Pharmacy had been taken up for 1973-74. He did not see any difficulty ahead as within a few years that number could be increased.

The secretary reported that he had written to the Ministry of Home Affairs asking which classes of persons were included in the term "retail dealer" as defined in Regulations under the Misuse of Drugs Act 1971. Professor D'Arcy said he objected

strongly to the term. To the best of his knowledge it referred only to a general practice pharmacist and as he could not see why such a term had to be used.

Receipt of a letter from the Ministry of Health was reported together with samples of a standard identification card for patients receiving steroid therapy. The letter stated the cards had been distributed to hospital and general medical practitioners in Great Britain in 1961 and asked for the Council's comments on making them available in Northern Ireland. The president said he was sure the proposal would have the whole-hearted support of Council. Any person receiving steroid therapy ran a very grave risk if involved in an accident and the treatment was stopped in ignorance.

Reports from the Finance and Northern Ireland EEC Committees were adopted and it was agreed to impress the seal of the Society on the Regulations to increase the amount of the annual retention fee.

Irish News

Hospital doctors refuse to prescribe

Doctors in St Vincent's hospital, Dublin, have refused to issue prescriptions for Health Act patients attending the hospital, stated Dr P. Brennan, a consultant to the hospital. Addressing pharmacists at the close of a post-graduate course of the Eastern Health Board region, he said that such patients previously obtained supplies at different hospitals. They now have to go back to their private doctor.

Dr Brennan said that patients should have only one record card, on which the drugs being prescribed were coded and they should not be entitled to repeat supplies until they produced the card. He advised that in pregnancy all drugs should be avoided and only taken when strictly necessary in accordance with medical directions, uncontrolled dispensing of drugs could lead to serious dangers and often led to interference with laboratory testings.

Professor R. F. Timoney, Dean of the College of Pharmacy, said he was glad to hear Dr Brennan welcome the co-operation of pharmacists in advising on drugs. That led to a better inter-professional relationship which was becoming closer in that particular area and more useful to the patient. He was certain that all pharmacists wished to promote such a relationship and he had always advo-

The secretary pointed out that the opportunity had been taken to give effect to the Council's proposal that students who satisfied the conditions for registration as pharmaceutical pharmacists and applied for registration within five years of graduating would not be required to pass the Council's examination in pharmaceutical legislation.

Professor D'Arcy said a symposium on "The future of Pharmacy in Ulster" had been arranged for Wednesday, June 27, in the Medical Biology Centre, commencing at 2.15pm. Short papers would be given on pharmaceutical education by Dr F. Newcombe, general practice pharmacy by Mr W. Boyd, hospital pharmacy by Mr J. Graham, management in pharmacy by Mr T. Eakin, the students' viewpoint by Mr D. Morrison, and the role of the pharmaceutical Society by Mr W. Gorman. Various opinions were held about the future of pharmacy and the symposium would afford an opportunity for members to express their views. He thought much good could come from the afternoon's discussion.

Forensic exam successes

The following candidates have been successful in the forensic pharmacy examination held recently by the Pharmaceutical Society of Northern Ireland:—E. J. Allison, E. A. Butler, S. E. Daly, A. M. Dickson, M. Henry, B. E. Kerr, D. J. Morrison, R. S. B. Rankin, T. J. Scott, S. J. Smyth, B. J. Spence.

cated that pharmacists—especially hospital pharmacists—should be utilised more in collecting data on adverse reactions.

Fee structure for IPU settled

Fee details were finalised at the May meeting of the Irish Pharmaceutical Union in Dublin. Membership will be £8 a year entitling members to the benefits and privileges of an organised, registered Trade Union which has secured a negotiating licence.

If a group require extra services its members will pay an extra fee. At present the only group is the community pharmacists' section who require a price list, and the community pharmacist is being asked to pay a total annual subscription of £25. Employee pharmacists in the community section will be contacted about forming their own group.

The EEC delegates reported on recent negotiations with the Department of Health, the Institute of Chemistry and the PCA on the question of "The Responsible Person" in Industry (Draft Directive 2).

Licence results

The following passed the May Licence Examination conducted by the Pharmaceutical Society of Ireland:

H. C. Bayat; Veronica A. Fchily; M. E. Fogarty; Ann O. Hillery; T. M. Holly; E. Kara; Philomena Kelleher; Mary G. McHugh; M. M. B. Mahony; Mary C. Moran; E. J. K. O'Gorman; Margaret M. A. Skinner; Evelyn M. Tighe, and A. L. M. Walsh.

Why pay through the nose for your decongestants?

vapex

family products

relieve the discomfort
of cold symptoms
in nose, throat and chest—
quickly!

The new VAPEX dispenser—
loaded with decongestants
from the popular VAPEX range.
Outlay is low, profits are high.
Don't miss out.
Powerful promotional
backing starts soon!



Don't stock in
with decongestants
until you've seen
your KERFOOT representative

— He'll be calling soon to give you full details.



It will pay you to care as much about black and white as ILFORD.

ILFORD care about the black-and-white film they make.
That's why HP4 and FP4 are the best quality films you can sell.

Either in 35 mm or roll film version (FP4 is also
available in 126 cartridge).

Stock ILFORD and you'll keep everyone satisfied.
Your customers (they'll be getting the results they want).
Yourself (you'll be getting the profits you want).
It's surprising the happiness a little care can bring.



ILFORD Limited, Photo Product Sales, Ilford, Essex.



ILFORD Limited, Ilford, Essex A CIBA-GEIGY Company

New products and packs

Cosmetics and toiletries

Tender Tints range

Outdoor Girl have introduced a new makeup range called Tender Tints which are creamy gels for eyes, cheeks and face. Because they are creamy, Outdoor Girl say they will go on smoothly and blend evenly to give a see-through glow of colour for Summer.

The Eye Tender Tints (£0.25) consist of yellow, turquoise, pink, blue, purple and green colours; the Cheek Tender Tints (£0.25) include amber and clover colours and Face Tender Tints (£0.25) have honey, copper and tan shades.

Outdoor Girl have also introduced matching lipstick and nail polishes, both plain and pearl shades. And they have repackaged the lipstick into a larger case at the same price (Girl Cosmetics Ltd., Surbiton, Surrey KT6 7LU).

Je Reviens travel spray

From Worth Perfumes comes a new addition to their Je Reviens range, the travel spray, which is an elegant black and gold atomiser containing 1oz of Je Reviens Parfum de Toilette (£1.50).

The slim container is presented in a modern coffret in white, banded in gold and blue, while the spray is metered for ease and economy (Worth Perfumes Ltd., Magnolia House, 160 Thames Road, London W4 3RG).

Tiki Vitamin E products

Carter Brothers have introduced the Tiki range of vitamin E products which consists of Tiki skin cream, said to be specially blended from natural oils with vitamin H1 and calendula plus alpha-tocopherol. This skin cream is claimed to both nourish and revitalise the skin and will also provide relief against sunburn. Presented in 25g jars, with 30mg of vitamin E per gram of cream.

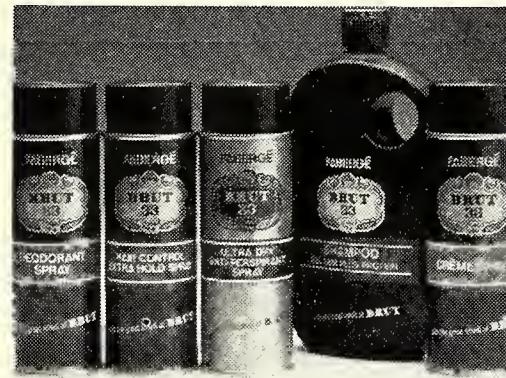
A companion to the skin cream is the Tiki skin soap, available as 4½oz bath tablets, with 10mg of vitamin E per gram. Combination pack of cream and soap is £1.85.

Also from Carters is vitamin E sun-tan oil (£0.37½) which includes a filtering element and vitamin E (Carter Bros, Glen Laboratories, Shipley, Yorkshire BD17 7AQ).

Aqua Manda foam shave

An aerosol foam shave has just been added to the Aqua Manda for Men range. The stiff creamy foam is said to soften up the beard for a close shave and contains the Aqua Manda for men fragrance.

For a limited introductory period the foam shave is being offered at 40p. The normal retail price will be 45p (Goya Ltd., Badminton Court, Amersham, Bucks).



Brut 33 for men

Fabergé's newly created Toiletries Division has introduced a "realistically priced" range of functional products called Brut 33.

The Brut 33 toiletries range offers five functional products, each with Brut fragrance. These products are Brut 33 ultra dry anti-perspirant spray in a 198g aerosol (£0.53); Brut 33 deodorant spray, also in a 198g aerosol (£0.53); Brut 33 creme shave (£0.39) said to have an extra rich moisturising formula; Brut 33 hair control spray with a dry formula (£0.39) to help give hair extra hold, but with the casual, natural look; and Brut 33 balsam and protein shampoo (£0.62½) presented in a 470cc polythene bottle.

All the products are packaged in Brut green containers with identifying colour bands (Fabergé Inc., Ridgeway, Iver, Bucks).

Revlon's Charlie

Revlon are launching a new fragrance called Charlie in September which they describe as being "fresh and full of surprises, the right-every-time smell".

Charlie will be available as 63cc cologne (£1.75), 14cc cologne spray (£1.23), 60cc cologne spray (£1.84), 98cc cologne spray (£2.46) and a 14 cc perfume spray (£2.93) (Revlon International Corporation, 86 Brook Street, London W1).

Hair care

More hairbrushes

Two recent additions have been made to the ranges of hairbrushes currently being distributed by Jacqueline Sales. The first is in the Royal Sweden range, and is a coloured wooden handbag brush (£0.65), in birch with black pure bristle/nylon mixture filling (code no. 15565). The brush handles are coloured red, blue or green, and the brush is presented in an attractive break-back counter display pack of six assorted colours (two of each).

The other new brush has been added to the Jacqueline range and is a full radial handbag brush (£0.67), Swiss made with



quality polypropylene handles in three colours (orange, purple and black) plus a predominantly bristle filling with nylon reinforcement.

The break-back counter display pack contains six assorted handle colours (two of each), and the code no. is Jac 811 (Jacqueline Sales, a division of Jackel & Co Ltd., Kitty Brewster Estate, Blyth, Northumberland).

Slimming aid

Sweetening powder

Hermesetas are to launch a powder sweetener on June 11. The powder, Sprinkle Sweet, is said to have a sweetening power ten times that of sucrose, but contains 95 per cent less calories.

It is packed in a glass cylinder with a sprinkler top and screw-on plastic cap (£0.59). The label design incorporates the horizontal blue and white striping seen on breakfast crockery and includes an invitation to send for a free booklet giving recipes for the use of the product as well as a calorie counter and slimming tips.

Consumer advertising will appear from July for the remainder of the slimming season, and will feature whole pages in colour in *Honey*, *She*, *Family Circle* and *Readers Digest*, together with the specialised slimming magazines *Slimming and Nutrition*, *Shape* and *Silhouette Slimming and Health*. (Crookes Anestan Ltd, 1 Thane Road West, Nottingham).

Photography

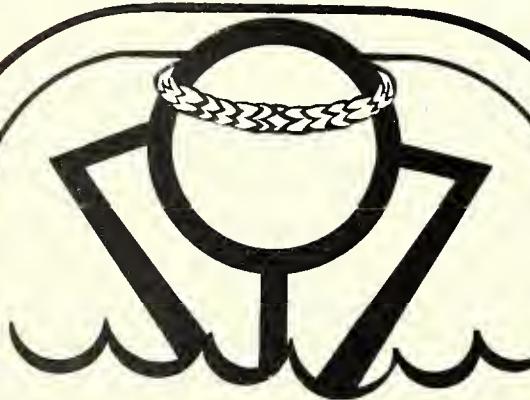
Larger print forceps

Paterson Products have added new print forceps to their range. Called Pro-forceps and designed for convenient handling of large size prints, they have angled grip and ribbed sides. The underside of the handle has three ridges for resting the forceps on the dish's side.

Pro-forceps, in polystyrene, are made in two colours, grey and green, and sold in a blister pack containing one pair of each colour (£0.40). (Available from Network Technical Distributors Ltd, 32 Bedford Row, London WC1).

Retailers-

Luma is back!



Sportmen. Rheumatic patients. People who simply suffer from aches and pains of a normal active life.

They're all potential customers for Luma, the soothing, relaxing, anti-rheumatic bath preparation. We're persuading them to take the plunge, in a nationwide advertising campaign. So be ready to meet the big demand.

Luma comes in 3 sizes:

750 G decorated plastic jar 36½p r.r.p. each
320 G decorated plastic jar 25p r.r.p. each
43 G cardboard Drumlet 5p r.r.p. each
all prices include V.A.T.

Refresh your profits with Luma—it is easy to stock and gives a handsome profit margin.

For details, samples, contact:

J. P. Lennard Ltd.,
15 Forum Drive,
Rugby.



Tel: Rugby 4839



A PROFITABLE AND
EASY SELLER—
SUMMER
AND
WINTER

FOR
CHEMISTS
ONLY

AIDEX FOR SUNBURN...

AIDEX FOR CUTS AND ABRASIONS...

AIDEX FOR STINGS AND BITES...

AIDEX FOR SCALDS & SCRATCHES

Aidex BURN & WOUND CREAM

FOR ALL MINOR INJURIES
Trade Price PER DOZEN £1.20 + VAT
28g. TUBES EACH 28g. TUBE 16½p inc VAT
FOR BONUS TERMS, DIRECT ORDERS ONLY
OR FROM WHOLESALERS

NATIONAL ADVERTISING
Commencing now throughout the Summer

ORDER
NOW!

CUXSON GERRARD
Oldbury, Warley,
Worcs. B69 3BB
Tel: 021-552 1355

Trade News



Five-pack Toothy size

Toothy, the toothpaste impregnated disposable toothbrushes from Casey Tre-gaard Associates Ltd, 20 Blackfriars Lane, London EC4 are now available in a five-pack size (£0.18) as well as the previously marketed singles. This new pack size has been specially designed for use in—or away—from the Toothy display outer whilst still retaining the impact message of this new concept in dental hygiene.

Foamy goes on trial

To convert more wet shavers over to aerosol shaving cream, Gillette Industries Ltd, (Great West Road, Isleworth, Middlesex), has introduced a trial size version of Foamy. The new 90 gram can, with a recommended retail price of 19p, will be supported by heavy trade bonusing which will, say Gillette, enable the price to come down to a lower level.

The new can complements the existing 160 gram and 320 gram sizes of regular Foamy.

Accessories from Geordie

A range of prepacked brewing accessories has been introduced by Viking Brews Ltd, 28 Clive Street, North Shields, Northumberland.

They include individually-wrapped hydrometers, drums of campden tablets, syphon U bends, thermometers, clear plastic syphon tubes, blue plastic syphon taps, and measuring spoons in sets of four.

A range of stoppers and caps come in packs of 10—white metal screw caps, black plastic external and internal stoppers. Crown corks and press-on caps are in larger packs.

Unican repackaged

New packaging is being introduced for the 16 wines in the Unican concentrated grape juices range. The labels are in four colours, the illustrations evoking an atmosphere of good food, with glasses of wine predominating.

Distinctive designs are used for the red wines, the white wines, and the group which includes the sherries and the meads. The instructions have been revised and simplified, and the wine is produced entirely in a one-gallon jar.

The grape juices, available from Grey Owl, Morley Road, Staple Hill, Bristol, will be supplied shrink-wrapped in sixes.

Acuspeed reformulated

Acuspeed FX-20 developer has been reformulated to give perceptibly finer grain and higher resolution together with a lower level of the base fog normally associated with speed increasing developers, claim Paterson. They say its prime advantage is in producing a more continuous tonal scale from shadows to highlights. A tendency to high contrast has been replaced by the

yielding of a more normal characteristic curve and less critical development times. No changes in the recommended meter settings have been made.

The new Acuspeed is claimed also to have enhanced keeping qualities. The standard dilution for normal work is now 1 + 7 with slightly longer development times. Full information is given in the new instruction leaflet supplied with the developer.

Prices are 250ml £0.49, 500ml £0.82, 1,000ml £1.45. Available from Network Technical Distributors Ltd, 32 Bedford Row, London WC1.

Christmas showrooms

Jean Sorelle Ltd, 117 Great Portland Street, London W1N 6AH are holding their regional Christmas shows of the Jean Sorelle range on June 18-21 at St Enochs Hotel, Glasgow; June 25-28 Metropole Hotel, Leeds; July 2-5 Royal Station Hotel, Newcastle-on-Tyne; July 9-12 Midland Hotel, Birmingham, and Metropole Hotel, Brighton; July 16-19 Piccadilly Hotel, Manchester, and Queens Hotel, Cardiff; July 30-August 2, Hendon Hall Hotel, Hendon, London NW4.

Kodak—an apology

Kodak Ltd are apologising for the price error that appeared in their advertisement in the *Observer* Colour supplement on June 3, when the Kodak pocket Instamatic 300 camera was featured. The suggested price given, however, was for the Kodak pocket Instamatic 100 camera outfit. The company regrets any inconvenience incurred by photo dealers or the public.

Subscribers are asked to note that all connections with Mr A. B. Downes, who formerly represented Benn Brothers in North Wales, Shropshire, and some adjoining areas, have been severed. Accordingly, any renewals for this publication, or any other publications produced by this company should be sent for the present to: Circulation Department, Benn Brothers Ltd, Lyon Tower, 125 High Street, Colliers Wood, London SW19 2JN.

Prescription specialities

DECADRON Injection Shock-Pak

Manufacturer Merck Sharp & Dohme Ltd, Herford Road, Hoddesdon, Herts.

Description Colourless solution containing dexamethasone sodium phosphate equivalent to 20mg dexamethasone per ml.

Indications Adjunctive treatment of shock where massive doses of corticosteroids are needed, eg severe shock of haemorrhagic, traumatic, surgical, or septic origin.

Contraindications Systemic fungal infection.

Dosage For intravenous use only. Usually 2 to 6mg per kg bodyweight as a single injection. May be repeated in 2-6 hours.

Precautions Therapy must be accompanied by standard measures used in the management of shock. Administration should be continued usually for no longer than 48 to 72 hours. In septic shock, antibiotic therapy must be continued.

Side effects Peptic ulceration, transitory burning or tingling sensations. Adverse reactions associated with short-term, high-dose corticosteroid therapy are uncommon.

Storage Sensitive to heat, should not be autoclaved. Protect from freezing. Shelf life, 2 years.

Dispensing diluent Sodium chloride or dextrose injection for infusion.

Packs 5 ml vial (£10 trade).

Supply restrictions P1, TSA

Issued June 1973

ZAROXOLYN

Manufacturer Pennwalt Pharmaceuticals UK, (Division of S. S. White Ltd), 32 Clarendon Road, Harrow, Middlesex.

Description Zaroxolyn 5: blue embossed tablets containing metolazone 5 mg. Zaroxolyn 10: yellow embossed tablets containing metolazone 10 mg.

Indications Diuretic in cardiac oedema, oedema of renal disease, late pregnancy and cirrhosis of the liver. Mild to moderate essential hypertension.

Contraindications Anuria, hepatic coma or precoma, known hypersensitivity. Should not be used in children, nursing mothers or the first trimester of pregnancy.

Dosage Usually: hypertension, 5mg; oedema of cardiac failure, 5-10mg; oedema of renal disease, 10-20mg. oedema of pregnancy, 5mg; hepatic ascites, 5-20mg, all as single daily doses, adjusted as necessary. Maximum 80mg in 24 hours.

Precaution Potentiation may occur with other antihypertensives. Fluid and electrolyte balance should be monitored. Insulin requirements may change.

Side effects Hypokalaemia may occur particularly in digitalised patients, after steroid or intensive diuretic therapy and in patients with cirrhosis or severe ischaemic heart disease. Hyponatraemia may occur. Headache, gastro-intestinal disturbances, cramps and dizziness have been reported infrequently. Very rarely, urticaria, leucopenia, tachycardia, chills, chest pain and gout have occurred.

Storage Protect from light.

Packs: 5mg: 100 (£2.80 trade); 10mg: 100 (£3.75 trade).

Issued: June 1973.

Promotions

Stand from South Coast Hosiery

South Coast Hosiery have introduced a new counter display stand finished in gilt, topped by an attractive Boutique header. This revolving unit is said to display dozens of Norman Hartnell and Bear Brand hosiery packs, and has been "especially designed to take up very little space". South Coast Hosiery are also introducing something new in packaging. They have redesigned the range of Norman Hartnell packs which now have five different jewel colours to complement the cosmetic tones of Bear Brand wallet packs (South Coast Hosiery, Benson House, Weir Road, London SW12).

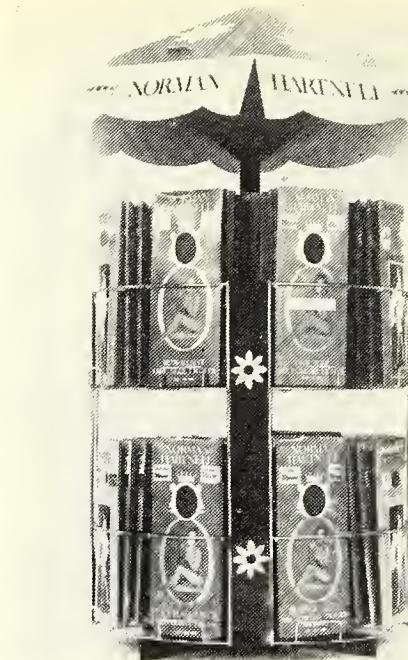
Polaroid advertising plans

The 1973 advertising campaign from Polaroid for instant picture cameras is described as giving dealers access to some 16 million households throughout the United Kingdom. "Instant Memories" is the theme of the campaign which is being carried by selected National Press and by Network Television. The Press and TV advertisements began to appear at the end of April and will run through until the end of July. Some 300 spots have been booked at various viewing times.

1973, say Polaroid, sees the introduction of a totally new approach to their camera advertising. Recent research has shown that the majority of the public now understands the principles behind instant photography, and this opens up tremendous scope for a new storyline. The emphasis now lies more on when to use your Polaroid camera, rather than how.

The prices of Polaroid cameras also receive a strong mention. Again, research showed that more than half of the public knew the pre-VAT price of the cameras, and the new lower prices are obviously a strong inducement to buy.

And, in order to communicate these many messages clearly, Polaroid has lengthened its TV spots to 45 seconds: a



time increase of 50 per cent. It shows the photograph being taken, and the end result. The advertisement ends with the news that the camera is well within the financial reach of every household.

Further support is offered to dealers by encouraging them to participate in the monthly promotions available to all stockists direct from Polaroid (Polaroid UK Ltd, Welwyn Garden City, Herts).

Coupon boost for Kotex

A coupon worth 4p will be included on all 12's packs of Kotex New Freedom and Kotex feminine towels during June, redeemable against the customer's next purchase. The impact of this type of couponing, taking place at the point of purchase, is expected to be far greater than the conventional magazine coupon, and redemptions are expected to run at a level of 20-25

on TV next week

Ln = London; M = Midland; Lc = Lancashire;
Y = Yorkshire; Sc = Scotland; WW = Wales
and West; So = South; NE = North-east;
A = Anglia; U = Ulster; We = Westward;
B = Border; G = Grampian; E = Eireann;
CI = Channel Islands.

Alberto Balsam creme rinse and conditioner: Y, NE

Alberto VO5 hairspray: Y, NE

Aquafresh toothpaste: WW

Bisodol: WW

Bristows shampoo and conditioner:

All areas

Close Up: All areas

Cool: All areas

Crest toothpaste: Y

Anne French deep cleansing milk: Ln

Harmony hairspray: All areas

Harmony Protein Plus Shampoo: All areas

Immac: All except Ln, E

Kodak: All areas

Milk of Magnesia tablets: Ln, Lc, Y, WW,
So, We, B, CI

Signal: All areas

Sure: All areas



Point-of-sale material for Bio-Facial, the skin care treatment, now being distributed by Eylure Ltd, Grange Industrial Estate, Cwmbran, Mon.

per cent. The coupons will not be available on Kotex feminine towels size one and Kotex New Freedom packs distributed in polysacks (Kimberly-Clark Ltd, Larkfield, nr Maidstone, Kent).

£1 million relaunch for Ultra Brite

Colgate-Palmolive are relaunching Ultra Brite toothpaste with new formula, updated brighter packaging—and £500,000 worth of advertising.

The formulation now includes Zircosil (zirconium silicate), said to "polish teeth so white they shine". This message is being passed to the consumer in a television campaign starting on June 11 and running until the end of the year. During the launch period of June to August, the spots will average ten a week.

A national coupon drop (2p value) will be carried out early in August, and a range of supporting display material is available. Launch packs are flashed with 4p, 5p, 7p and 8p-off each of the four sizes respectively (Colgate-Palmolive Ltd, 76 Oxford Street, London W1A 1EN.)

Letters

Apocaire

Sangers' statement (May 19) to the effect that the benefits of their Apocaire scheme "have been widely recognised", I imagine stems from the number of signatures they have obtained from retail pharmacists.

A Sangers' representative recently asked me to sign a slip of paper to say "he had called" and I refused, as the document clearly stated that I would be willing to participate in their promotional plan. He then offered to cross out the wording but still wanted me to sign the document, which I again refused to do, and I had to ask him to leave the shop.

I suspect a number of busy pharmacists have been caught in this manner. It appears to me that Sangers are playing on words by saying that there is no commitment in their plan, but are attempting to create a strong obligation by gaining signatures by any means. A number of my colleagues tell me that they have signed following the meeting, but still intend to be highly selective in their purchasing and promotional products—and quite right too."

H. Haycock
Tavistock, Devon

Thanks

May I take this opportunity of thanking those of my colleagues who voted for me in the recent Council election. I will continue to endeavour to ensure that pharmacy becomes an increasingly more satisfying profession.

D. N. Sharpe
London N3

May I through the courtesy of the C&D express my thanks to those who have again given me the privilege of continuing to serve pharmacy.

Mervyn Madge
Plymouth

Sales Record: Healthy

The Islander Health & Sun Lamp from Hanovia.

The one that shines brightest in the sales charts.

Because this lamp has the choice of Infra-red or Infra-red and Ultra-Violet together, the built-in Timer and Warning Bell that people want.

And because the whole thing comes, compact and portable, in a colourful display box that really packs it home !

Order the Islander — your place in the sun.

Full colour sales leaflets and dispenser FREE.

Recommended retail price : £16.72 inc. VAT.



SEND FOR A FREE GUIDE
TO THE ISLANDER

Name.....

Address.....

CD3

HANOVIA

HANOVIA LAMPS LTD, BATH ROAD, SLOUGH, BUCKS. SL16BL
Tel: Burnham (06286) - 4041. Telex: 848123

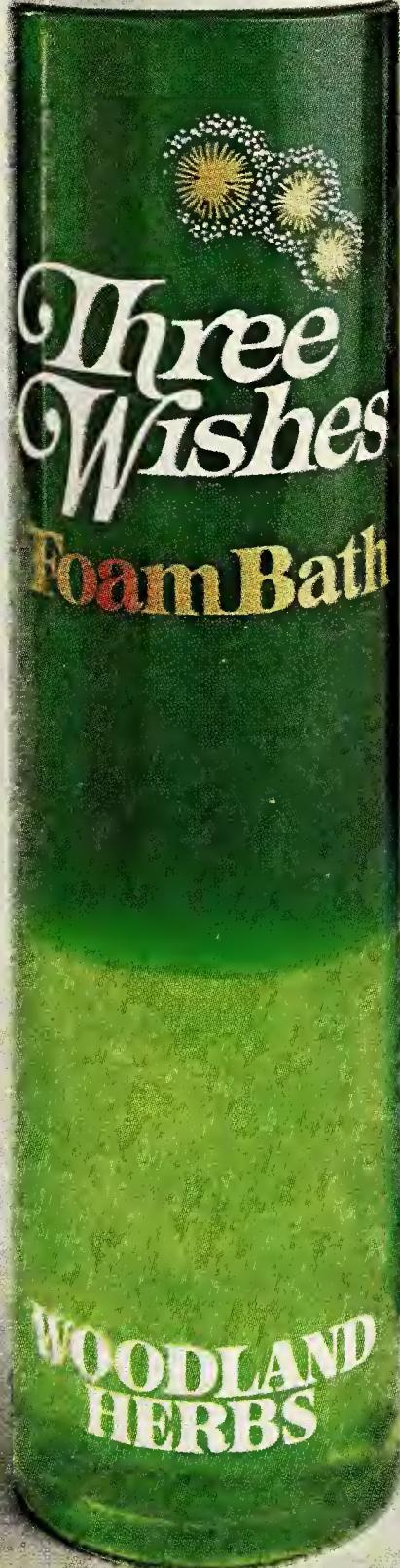
Three Wishes is already national brand leader* sales still bubbling!

Congratulations to those of you
who've kept in stock.

Commiserations to those who haven't.
But *Three Wishes'* success—outselling
all liquid bath foams in four months
from launch—looks like continuing.

Is the new national brand leader
on your shelves?

Three Wishes
—to make her feel more beautiful.



EG

Elida Gibbs Ltd
The Brand Builder



If she doesn't get it from you... she'll get it from the guy next door

- * Oil of Ulay[†] sales up 32% Market rise . . . only 6.7%
- * Exploit rising demand. Display Oil of Ulay.
- * Don't forget that Oil of Ulay gives 28% profit.
- * Oil of Ulay is still the most heavily advertised single product in IPC women's magazines.
- * Keep stocks high, and the other fellow's hand out of your till.
- * Women buy more Oil of Ulay than any other skin care product.
- * Problems? Phone Ted Garwell (he's our sales manager)

Garsalle division of Richardson-Merrell Ltd, Shire Hill, Saffron Walden, Essex. Tel. Saffron Walden 7431.

[†]Oil of Ulay is a registered trade mark.

Comment

Rewards from research

Pharmacists are frequently being accused of apathy—only 30 per cent vote for a council to represent them, attendance at local branch meetings is consistently low—the cry is the same year after year. One may therefore wonder how much the poor response to the general practice research projects (see p771) is due to apathy.

Branch representatives at a meeting in 1971 were enthusiastic about the idea, but those members keen enough to attend a branch representative's meeting can hardly be accused of apathy. The Council, together with heads of schools and the Department of Pharmaceutical Sciences took the trouble to compile a list of 50 topics likely to be of scientific or professional interest to pharmacists. But after the initial inquiries few members pursued the matter further.

Surely pharmacists are not so disillusioned that they cannot find one aspect of their careers sufficiently interesting to study in depth? Admittedly "the wet strength of paper handkerchiefs" may not be everyone's idea of fun, but every general practice pharmacist is personally involved in "patterns of self-medication," "patterns of counter prescribing" and "pharmacy changes as a consequence of joining the EEC."

Some of the projects undertaken already by the not-so-apathetic have a sociological bias, for example, "why the general public seeks health advice from the pharmacist" or "the prescribing habits of doctors." Even if the pharmacist is bored by today's pharmaceutical practice he can surely summon a spark of interest in the behaviour of his fellow humans.

One main reason for the lack of response is presumably the lack of time. During working hours the

needs of the customer must take precedence over the pharmacist's own particular interests.

There may be far more intellectual stimulation in investigating "drug information retrieval" than in counting 20 aspirin, but if the customer wants 20 aspirin then everything else must wait. The overworked pharmacist crawling home at 7.30 pm or later may feel he has seen enough of pharmacy to last him for one day at least.

Another reason for the lack of response may be that some of the people most likely to undertake a project have already embarked on an Open University course.

Whatever the reason, the poor response is a missed opportunity. There is tremendous personal satisfaction to be gained in completing a worthwhile project, especially if it leads to a further qualification.

Benefits for the future

Any research into the practice of a profession is also bound to benefit the profession as a whole, especially when it gives insight into directions for the future.

Developing a habit of continuous research need not impose an intolerable extra burden. Determining whether, for example, TV advertising actually affects sales needs only a few seconds to display an advertised product next to a similar one not being advertised and a few seconds to record purchases, yet much valuable information may be gained.

Small experiments of this nature easily lead to larger projects, with an increase in business efficiency and corresponding financial returns—not to mention the increase in job satisfaction.

Post Scripts

A birthday package

This was an unusual package, it was the ninetieth birthday of the company and the celebration package embraced all the staff, directors, the local mayor, a few guests and a packed comprehensive lunch that included champagne and strawberries. The House of Bronnley is essentially a family business and the determination to keep it so was reflected in the birthday party. There were numerous presents, bottles of champagne for the long service staff, a water colour for Mr Ivor Ursell, export manager with 47 years service and a clock from the staff to Mr and Mrs Rossiter.

Congratulatory telegrams were received from associates in Australia and Germany, suppliers and competitors.

The House of Bronnley now has the distinction of being one of the only businesses in its field which is still entirely privately owned.

It was founded in 1883 by young James Bronnley, when he was only 19. He was

the first man to make a superfine, triple-milled perfumed soap, and his daughter, Mrs G. H. Rossiter, is one of the joint managing directors with her husband, Mr H. Rossiter who, in addition to being a business man, is a gifted amateur painter whose work has hung in many of the main galleries and "on the line" in the Royal Academy. Also on the board is James Bronnley's granddaughter, Ann Rossiter, who took an honours degree in history at Edinburgh University and a post-graduate course in business management, before joining the firm. The company appreciates the able assistance of Mr Arthur Smith, C.A., who is also a director, and who has been with the company for 27 years.

Mr Rossiter acknowledged the contribution made by the staff to the growth of the company. The reputation had been built up on the energy and interest they had put into their work. Later the Mayor disclosed that when he had sought guidance on the content of his speech Mr Rossiter had said "Thank the employees". That was typical of the management that had not only ensured the planned growth of the company but "had always been sensitive to the needs of its employees".

The package was just right, but not unexpected, Bronnley have a reputation for that aspect of their range.

Garden refuse

A bizarre garden patch has been "cultivated" during the past year by scientists of British Cellophane Ltd, Bath Road, Bridgwater, Somerset. They are investigating the long-term degradability of packaging materials and have buried samples of transparent film wrappers, metal cans and plastic bottles which they examine periodically.

Uncoated and nitrocellulose-coated types of cellulose film were found to have disintegrated after two and three months burial respectively, according to *Merchandising Vision*, the BCL publication. After one year plastic films were generally intact, rigid polythene containers showed no visible signs of deterioration, and metal cans had rusted considerably but were obviously far short of complete disintegration.

Copies of the full report on the tests are available from the Research and Development Department of British Cellophane Ltd.

CAREERS IN PHARMACY

Development of hospital training

by Mrs J. E. Tinegate, Regional Pharmacist, South Western Regional Hospital Board

The newly qualified pharmacy graduate is required to undertake a one year practical training in order to be accepted for registration by the Pharmaceutical Society.

The maintenance of a register of pharmacists is an obligation placed on the Pharmaceutical Society and its function is to provide a list of persons who may be responsible for dispensing prescriptions for the general public and may be in personal control of a pharmacy. This gives proper protection both to members of the public as patients and to the pharmacist as a professional person.

The pre-registration year is one of tremendous importance and is when the student must learn to relate practical experience to his academic knowledge. The student, having sown his wild oats at university, must now learn to compromise with the realities of life and see the need to take responsibility, to plan and make decisions and to work and lead a team of technicians and assistants. He must develop both a sense of duty and professionalism in his relationship with patients and with medical and nursing staff. He must become well acquainted with the legislation regarding the care, custody, issue and use of medicines.

It is with this in mind that the Pharmaceutical Society now require that all pre-registration pharmacists spend at least six months in pharmacy practice (either general practice or hospital) and may no longer train exclusively in industry or in the academic field where there is no direct dealing with patient prescriptions.

In the past, pre-registration training has not been of a very high standard and students have frequently been used as a pair of hands. The philosophy of "chuck them in at the deep end" does not always produce the best results. It is true that the shortage of pharmacists in the past has often precipitated this type of situation. It is hoped that the integration of the pharmaceutical services in 1974 may well produce a more satisfactory structure for training in the future.

Comprehensive training

The hospital pharmaceutical service provides the means of getting the most comprehensive type of practical training. The prospects of a career in the hospital pharmaceutical service are exciting, for the role of the pharmacist in hospitals is one of increasing importance and responsibility. The hospital pharmacist in the future will participate more fully at management level and have a much greater involvement at ward level with his medical and nursing colleagues and with the patients.

One of the more important aspects of the pharmaceutical service is the development of functional management and the organisation of the pharmaceutical service

along divisional lines and there will be opportunities for staff to rotate between divisions to broaden their experience. Each division will develop its own research problems.

(1) Clinical or patients services division

This includes:

- (a) The dispensing of medicines for hospital patients.
- (b) Ward visiting to check prescriptions and the administration of medicines and to advise on medicines including drug interaction, formulation and absorption, storage, price, etc.
- (c) Direct patient involvement includes the issue of medicines to outpatients and inpatients-on-discharge regarding their medication. The taking of drug histories on admission may be an innovation in the future.
- (d) The giving of advice to medical and nursing staff and the organisation of drug information and retrieval systems.

(2) Manufacturing division

Manufacturing in hospitals is now being organised on a much larger scale and to much higher standards to comply with the regulations of the Medicines Act and to conform to the requirement of the "Orange Guide".

The general manufacture of pharmaceuticals includes (a) the preparation and packaging of medicines on a large scale and the preparation of a large number

of "specials" or formulations not available commercially.

(b) The preparation of sterilised products including IV fluids, injections, irrigation solutions and special formulations.

(c) The organisation of an IV additive service. Only a few hospitals are now giving this type of service but it is anticipated that there will be an increasing involvement in this field.

(d) The preparation of radiopharmaceuticals is developing rapidly and pharmacists are involved.

(3) Quality control division

This division is responsible for the development of continuous quality assurance, to insure that the quality of all medicines used, made or stored in hospitals is maintained by rigorous quality control testing procedures and to maintain adequate standards for working facilities, working methods, documentation and staff attitudes. This division would be expected to examine problems and suggest solutions.

(4) Management division

With the disappearance of the Hospital Management Committee, pharmacists must become better and more efficient managers, able to organise and direct the pharmaceutical services, able to work within a financial budgeting control system and to take their part as senior officers of the hospital management team.

Management is fascinating. It is mostly

Fig 1. Pre-registration experience. South Western RHB proposed programme

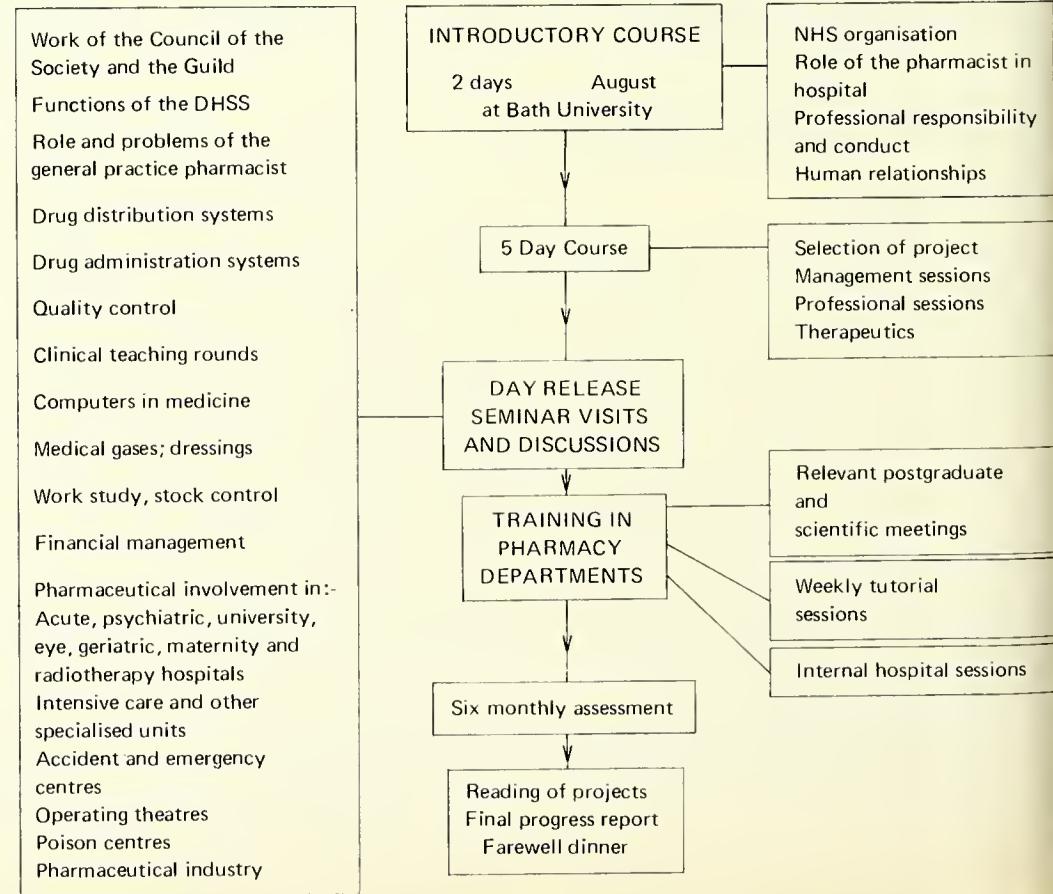
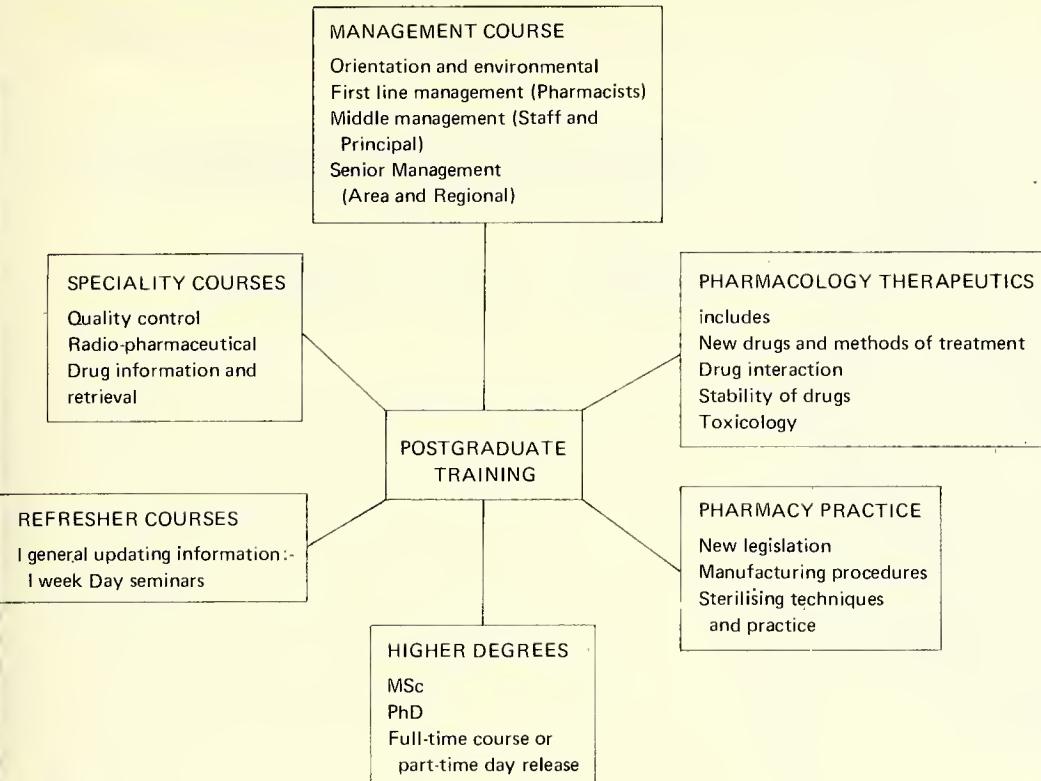


Fig 2. Postgraduate training for hospital pharmacists

concerned with human relationships and is in no way concerned with clerical work as many students imagine.

The appointment of regional pharmacists with a direct and personal responsibility for the organisation of training on a regional or area basis will provide the means to give pre-registration pharmacists a first class training on a broad basis.

The integration of the pharmaceutical services in 1974 may well provide the mechanics for the provision of a regionally organised general training scheme for all pharmacists with opportunities for gaining practical experience in both the hospital service and general practice pharmacy. It would also provide optional electives for those who wish to gain experience in industry and in the academic field.

This more generalised training would normally follow on from academic studies and be concerned with the practical aspects of pharmaceutical work. It could alternatively be organised on a "sandwich basis" and be undertaken during the academic studies on the lines of the scheme now organised by Bradford University.

The South Western Regional Hospital Board is now organising its first intake of pre-registration students on a regionally organised training scheme. This scheme is outlined in figure 1 and comprises two short courses and a series of day release seminars, visits, discussions and tutorial sessions. Students are appointed by the regional hospital board but seconded to an area for practical training where they will work in different types of hospitals within the area. This regional board is also considering how far this training may be extended to include pre-registration students from general practice and the academic and industrial branches of the profession in the southwest.

Pharmaceutical knowledge and practice is changing very rapidly and hence continuous postgraduate training is vital to enable pharmacists to continue to function efficiently throughout their career. There is abundant evidence to show the

importance of general refresher courses for all pharmacists and courses are now offered by Schools of Pharmacy in conjunction with the Pharmaceutical Society. Figure 2 outlines other specialised courses also required by hospital pharmacists.

Opportunities in the hospital service

The progress after registration of a pharmacist of average ability may be:
Appointed pharmacist Year 1 Orientation and therapeutics course; Year 2 First line management course; Year 3 Speciality Course (manufacturing); Year 3-4 Appointed staff pharmacist in manufacturing; Year 4 Refresher course; Year 5 Speciality course (drug information). Appointed staff pharmacist — clinical services; Year 6 Middle management course; Year 7 Pharmacy practice course; Year 8 Refresher course; Year 9 Appointed principal pharmacist.

Within ten years of qualifying a pharmacist might well be able to look forward to a principal grading having first gained experience in different specialities. Pharmacists may not all travel by this route but may wish to specialise in a technical field. Principal grading for technical work organised on a regional or sub-regional basis will be their objective.

Pharmacists with outstanding ability may progress rather more rapidly and may set their sights on the area and regional posts. It is expected that high calibre pharmacists should be seeking area posts at about thirty-five years of age.

The hospital pharmaceutical service is in the midst of major reorganisation following the Noel Hall report on pharmaceutical services and there is an urgent need for more recruits.

Pharmacists who now embark on a career in hospital pharmacy may look forward to an interesting and fascinating future with opportunity for promotion hitherto unknown.

Students interested may obtain advice from any regional pharmacist.

How much pharmacists can earn

Retail pharmacy still offers the newly qualified pharmacist the highest financial rewards. Salaries of managers of independent pharmacies vary considerably according to the size of business, location and responsibility, and whether free accommodation is included—£3,000 per annum is not unusual. Locum retail pharmacists in the London area may earn a minimum of £55-£60 a week.

Boots currently pay their preregistration students in retail £1,350 to £1,450 according to district, pharmacists £2,000 to £2,500 according to experience and district and managers £2,560 to £5,000 according to branch turnover. Other multiples pay similar rates.

Pharmacists employed in wholesale outlets have frequently had previous experience in retail so salaries vary accordingly.

An increase in hospital pharmacists' salaries has recently been agreed by the Pharmaceutical Whitley Council Committee "C". Approximate rates, to be back-dated from April 1 are: Noel Hall grades, pharmacist, £1,680-£2,130; staff pharmacist, £2,298-£3,253 (bar operates between £2,916-£3,028); principal, £3,140-£3,758; area, £3,983-£4,544; regional, £4,825-£5,499. Pre-registration student, £1,290. Previous grades, pharmacist, £1,658-£2,070; senior pharmacist, £1,808-£2,236. Pre-registration student, £1,265.

In university teaching, assistant lecturers and lecturers receive £1,764-£4,299 (six annual increments), senior lecturers and readers £4,143-£5,247 with a minimum for professors of £5,376, exclusive of London allowance. Other colleges of higher education offer assistant lecturers £1,160-£2,242 and lecturers grade I £1,500-£2,525 plus £162 for graduates, £324 for good honours graduates or holders of further degrees in both cases. Lecturers grade II receive £2,355-£3,083, senior lecturers £3,131-£3,495, principal lecturers £3,421-£3,829, and readers £3,319-£4,339. London allowance is an additional £118.

Pharmacists are also employed by the Department of Health. They are recruited by open competition arranged by the Civil Service Commission at professional and technology officer grade I level, salary scale £2,910-£3,760, London weighting £175. They should have previous experience in a relevant field.

Opportunities for pharmacists in industry are so diverse that no set salary scales may be quoted. A newly qualified pharmacist may enter research and development at £1,700-£2,000 per annum. Representatives can expect a company car and expenses in addition. Those firms prepared to employ women usually offer equal pay and more and more firms are appreciating the value of women in their liaisons with the medical profession.



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CAREERS IN PHARMACY

Towards a more professional future

by I. F. Jones, Senior lecturer in pharmaceutical management studies, School of Pharmacy, Sunderland Polytechnic

The recent manpower survey conducted within the profession shows that 66·2 per cent of all pharmacists are currently engaged in general practice and the chances are that a healthy majority of today's students will end up "in retail" irrespective of original ambitions or current thoughts to the contrary. With some decades of working life ahead of the young graduate it is perhaps appropriate to speculate as to what the future functions of the pharmacist will be, how he will spend his working life and how pharmacy itself will develop in the light of socio-economic and political changes that might take place in the future.

Over the last two decades turnover dependence of general practice pharmacy on NHS receipts has increased steadily to about 40 per cent. The private independent sector is currently dependent to the extent of about 50 per cent,¹ the smaller turnover pharmacies in this sector a little more,¹ while in the multiple companies it is much less, with the largest company deriving only 15 per cent of its UK turnover from this source.²

During the past 25 years, while NHS receipts have been of growing importance to economic viability and consolidation, in the independent sector, over the counter sales have not kept pace and recently economic growth from commercial activities has been described as disappointing.³ Indeed, no real growth in counter business was reported in 1972.⁴ Quite the opposite comment applies to the multiple companies where the growth area is undoubtedly in commercial as opposed to professional terms. For instance Boots are reported to hold a dominant 28 per cent share in the toiletries and cosmetics market, 7 per cent above that for other chemists.⁵ In addition the company has suggested that its share of NHS dispensing may decrease in the future.⁶ Although the multiples make a considerable contribution towards the total turnover of all pharmacies in Great Britain, in terms of numbers of establishments they are in a distinct minority with about 1,600 pharmacies (all multiples) out of a total in Great Britain of around 12,000.⁷

Market erosion

The inability of the private independent pharmacist to consolidate his economic growth by commercial transactions has been evident for many years. The general abolition of the enforceable right of manufacturers to fix the retail selling prices of their products⁸ (medicines and books were exempted from this by the Restrictive Practices Court) has meant that "traditional chemists goods"—toiletries, cosmetics, chemist sundries and photographic lines—with the exception of medicines,

have become much more attractive as merchandisable entities to competitors, notably the grocers and the chain stores. Consequently the use of aggressive promotional methods by non-pharmaceutical retailers is resulting in the gradual erosion of the market share⁹ held by the chemist, particularly of toiletries, and cosmetics and sundries. This trend can be expected to continue to the detriment of the independent chemist. The multiple companies are in a quite different position for a number of reasons; their organisations are large enough to purchase stocks at advantageous rates, to compete effectively in terms of price and service and to manufacture and merchandise "own brand" products, but above all because they are better organised than their independent colleagues.

NPU

It is a matter of some regret to pharmacists to acknowledge that grocers too, are organised on a far higher plane of efficiency than the independent pharmacist. The National Pharmaceutical Union has a policy¹⁰ of assisting the independent chemist in this plight by encouraging their members to promote specially manufactured ("chemist own") products made to compete with the established brand leaders promoted so successfully by competitors. Experience of this policy has suggested that its success is questionable and a more recent scheme to supplement or possibly replace this by establishing a national voluntary trading organisation¹¹ for independent pharmacists can also be viewed with some pessimism. It is by no means clear that all who would be eligible to join would do so and in the ultimate analysis the extent of co-operation required by proprietor pharmacists in order to make the scheme viable could be beyond the degree of loyalty and discipline expected from the National Pharmaceutical Union membership. This is apart from a recent report of the launch of a more restricted but competitive VTO scheme by a quite separate organisation.¹²

It is possible to conclude that in the future, pharmacy, with the exception of the multiples, cannot afford to rely on economic security from commercialism although one might expect many decades to pass before the independent chemist's share of what used to be called "traditional chemists goods" will be insignificant.

Because of this rather bleak commercial outlook it is necessary to look at the professional aspects of pharmacy to determine whether or not there is a definite function for pharmacy which combines with it a secure future for pharmacists.

There has been an increase of over one-third in the number of prescriptions dispensed in England and Wales since 1949.

Corresponding to this there has been a gradual decrease (from 1954) of the number of establishments from which NHS prescriptions have been dispensed, with the result that the number of prescriptions dispensed per pharmacy (multiples included) has risen from about 16,000 in 1949 to about 26,000 in 1972. In Scotland the average prescriptions dispensed per pharmacy is less than that for England and Wales. This is due to there being a smaller average population per pharmacy in Scotland and a tendency for the number of prescriptions per patient to be smaller.

With no sign of a fall in prescription numbers, particularly as prescription charge reimposition in 1968 and its subsequent increase in 1971 did not affect numbers to any great extent, there is a high probability that with the trend of net closure of pharmacies that the amount of professional work to be undertaken per pharmacy will increase considerably. As a consequence more of the pharmacist's time will necessarily be spent in his present contractual¹³ obligations to dispense or to directly supervise the dispensing of NHS prescriptions. The question to be posed at this stage is will the professional work increase sufficiently in the future to warrant the full-time deployment of the pharmacist in a National Health Service? The answer to this may well lie in the ability of the pharmacist to give a more extensive professional service in the future combined with his wish and willingness to do so.

Nationalisation

At the present time there can be little doubt that the pharmacist is under-employed professionally and also that a number of pharmacists do not want to be fully employed professionally in a National Health Service because of fears that this might bring a nationalised service. While this attitude might be more common in pharmacists of some years standing, especially those with capital employed in their pharmacies, the younger pharmacist may not view a nationalised service with the same distrust as their more senior colleagues. The doctors, dentists and opticians appear to practise successfully on a fully professional basis outside a nationalised environment so why not pharmacists?

If current practice and a number of research reports are examined and evaluated the means towards full professional deployment of the pharmacist might be found, irrespective of nationalisation.

As a general rule prescriptions do not arrive at the pharmacy at regular intervals throughout the day, the height of dispensing activity generally coinciding with the timing of the physician's surgery. During these times observation has shown a trend

Continued on p767

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WESTONS CHEMISTS

Continued from p765

of routine practice to dispense presented prescriptions as quickly as possible. This policy has arisen for a number of reasons. For example two decades ago a prescription was likely to involve the pharmacist or his trained assistant in the use of manipulative skills in compounding and this necessarily was a time consuming function and a sense of urgency was understandable. While this is now rarely the case, the reduction in time spent in the physical aspect of dispensing is much less but the sense of urgency remains because there is instead much more dispensing to be done per pharmacy now than was the case in earlier years.

A second reason for haste is that many pharmacists feel that the best and most efficient pharmaceutical service is the quickest. This belief stems from fear that if this policy is not adopted the patient, even a choice, on subsequent occasions would take his prescription elsewhere. A third reason is that the sooner the prescriptions are completed the sooner the pharmacist can devote his time to the commercial activities of the pharmacy. Many may still feel a sense of inconvenience rather than satisfaction when a prescription is either presented at a time when the pharmacist's devotion to commercial activities has to be interrupted or if the prescription poses difficulties in terms of ambiguity or extemporaneous preparation. It appears to the author that in the manifestation of these policies the pharmacist has regrettably gone out of his way to put himself under unnecessary pressure and by so doing has unwittingly educated the general public to expect nothing but a quick service. Consequently if the patient has to wait a longer time than that to which he is accustomed there is the tendency towards impatience and complaint because he can visualise no reason for delay. The cry of "It's only tablets" is familiar to many.

There are good reasons to show that the most efficient service is not the quickest but that which gives the patient the best pharmaceutical service.

Dose-instruction

A report¹⁴ published in 1969 focused attention on the ability of patients to recall instructions on medication routines issued by the physician subsequent to the consultation. Many recollections were found to be inaccurate. One can envisage why this was so. The doctor may not have issued any oral directions to the patient (or even written directions to the pharmacist) or the patient may not have paid attention to the final remarks made by the prescriber. Alternatively the patient may not have understood, sought clarification and in still failing to understand left the surgery feeling that the doctor would form a poor opinion of his intellect if a further request for clarification was made, or that further questions would "waste the doctor's time". There undoubtedly are those who genuinely think they understand but when questioned in detail subsequently reveal uncertainty. The patient leaving the surgery with a form containing a number of prescriptions is likely to be confused. Because of this, there is a need for guidance on prescription medication after the surgery visit whether it be in the form of

instruction, clarification, confirmation or re-assurance. Where else but the pharmacy could this be given and who else but the pharmacist could give it?

If the pharmacist was to converse with every patient presenting a prescription as a matter of professional policy, this would slow down the total dispensing function. To some, this, as a routine situation, would not be acceptable for reasons already described but on the other hand it would most certainly be in the interest of the good health of the community and it would be a step towards the consolidation of the pharmacist as a professional entity in the local health team. The pharmacist could correct many instances of confusion in the minds of the patient and of ambiguity in the prescription. This would leave the patient with re-assurance, a feeling that the pharmacist does have an interest in his patients and above all that the pharmacist really does know something about drugs apart from how to count them.

Patient screening

Another factor which assists in building up a case for a full-time professional existence for the pharmacist is related to problems in current medical practice.

There can be little doubt that the average physician is overworked. Patients encounter increasing difficulty in obtaining an appointment to see the physician when the need arises, and it is of little comfort to the person who considers that he is in need of medical attention to be told to attend the surgery in two days' time or even next week. On the other hand there are those suffering from minor ailments who do not need to consume the physician's time but in fact do so.

There is, then, a demand for the provision of a service for screening patients who feel that they need to consult the physician and also to provide a centre for advice for those suffering from complaints of a minor nature which can be treated in the first instance without consuming the physician's time.

The pharmacist in general practice has been doing just this for many years although this is not recognised as part of his National Health contract. A study¹⁵ conducted by a medical practitioner of this function of advice given by general practice pharmacists revealed that in no case did the pharmacist exceed his authority when giving advice and in all cases (including those when the patient was directed to the physician) the advice given was appropriate and satisfactory. Other studies^{16, 17} have shown that a visit to the pharmacy had eliminated the need for a consultation at the surgery and as such had saved the time of the physician and that of the patient. A comprehensive service along these lines could be given if chemists as a whole accepted that their true vocation was in this field and not elsewhere and if the general public could be educated to think in terms of a visit to the pharmacy before considering the necessity of a surgery visit.

Regrettably not all pharmacists appear to want this function. This attitude was clear in the report¹⁸ of the Working Party on the Pharmaceutical Service in the NHS published in 1972. This concept and a corollary of compiling and maintaining a register of patients to monitor medica-

tion programmes was not adopted as a possible blueprint for future pharmacy practice within a National Health Service. Fortunately, there are many pharmacists who feel that this aspect of the report is not representative of pharmaceutical opinion. It would certainly be that alteration of pharmacy practice by adopting a greater devotion to professional matters would be time consuming and as such not be compatible with the maintenance of a high level of commercial involvement. But the latter is an aspect of the traditional chemist's work that can be delegated while the former is not. In any case the future of the independent pharmacist as a trader appears questionable and as such the attitude of resistance to a change to a more professional form of practice can be viewed as ultimately, self-defeating.

The other members of the local health team, the doctor, dentist and optician all have recognised professional roles in a National Health Service. In addition all have specialist skills which they exercise through a personal relationship with their patients. Because of the need for this individual personal relationship their function cannot be challenged or replaced by any other sector of the community unless they too are trained to acquire the appropriate skills. The general practice pharmacist might rightly describe himself as the expert on drugs. This is correct. But in practice he tends not to use his professional skills to the extent to which it is possible and as a consequence is not seen generally to build up a sufficiently close personal relationship with his patients that can be acknowledged in the same way as that of his other professional colleagues in the health team. Whatever the reason for not building up a professional relationship with his patient to the fullest extent the fact that many choose not to do so or who choose to delegate this function to an assistant, only helps to consolidate the popular opinion held by the public that the pharmacist is basically a commercially orientated technician involved in counting out unit dosage forms and making simple transfer of liquids from one container to another. Any such person is clearly vulnerable to replacement by another who, with a minimum of training could fulfill a technician's role at probably less cost to the National Exchequer than the pharmacist.

It can be predicted that the physician will become more remote from the general public because of overwork—partly contributed by the current practice of not using his time more effectively and from his increasing tendency to practise from health centres often distant from the homes of his patients. This need for a readily available preliminary screening facility and guidance advisory service will intensify until public pressure ultimately results in change. The long term future prospects for general practice pharmacists can only be envisaged in terms of a professional function within the National Health Service and if pharmacists do not make a concerted effort to recognise this and accept the extra professional functions then another sector of society would no doubt be pleased to do so. This other sector might be the community nurse, a trained technician or most likely the doctor's receptionist. If it was the latter then it would not be beyond the realms of possibility to

Continued on p771

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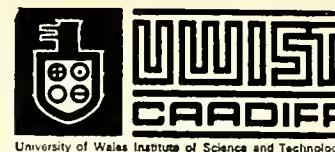
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PHARMACEUTICAL INDUSTRY CAREERS

Careers in the Pharmaceutical Industry are described in a recently published booklet obtainable free of charge from the

ASSOCIATION OF THE BRITISH PHARMACEUTICAL INDUSTRY,

Information Services,
162 Regent Street,
London, W1R 6DD
Tel: 01-734 9061

CAREERS IN PHARMACY

Further education: Part-time degrees

Students are usually familiar with the opportunities available for full-time post-graduate research leading to the degrees MSc and PhD. The pharmacist who leaves college immediately upon graduation may later wish to obtain a further degree but may be reluctant to embark on a full-time course. Financial commitments frequently act as a disincentive to the "nurse" student.

The following is intended as a guide to further qualifications which may be obtained on a part-time day release basis. A few full-time courses are mentioned when they depart from the traditional areas of academic pharmaceutical research degrees in hospital pharmacy.

In many instances, students who do not hold a first or second class honours degree from a British University or equivalent, may be expected to take a preliminary qualifying course before embarking on the further degree.

University of Aston in Birmingham

MSc in pharmaceutical sciences—Two-year course, students spending three consecutive days per week of each academic term during the first year, two days in the second year, at the university and the remainder in a hospital pharmacy department. The course covers management and hospital pharmacy, pharmacology including clinical pharmacy, medicinal chemistry, drug metabolism and distribution, analytical methods of drug determination, biopharmacy and formulation, numerical analysis and data processing and the student undertakes a research project.

The Pharmaceutical Society has accepted the course as an adequate alternative to the practical training requirements for registration.

Dr A. Z. Britten, Department of Pharmacy, The University of Aston, Gosta Green, Birmingham).

University of Bath

MSc and PhD degrees by research are both offered on a part-time basis. The student registers with the university Board of Pharmacy after submitting a detailed programme of the research he intends to do. He has an internal supervisor at the university and an external supervisor, for example the hospital chief pharmacist, with whom he comes to an arrangement regarding day release. The MSc degree must be completed in 2-4 years, the PhD in 3-5 years.

Master's degrees by course work, principally in biopharmaceutics, clinical and applied pharmacology will become available on a one-year full-time or two-year part-time basis in 1974 when new buildings are completed.

Shirley M. Hancock, University of Bath, Claverton Down, Bath).

Queen's University of Belfast

MSc in hospital pharmacy—One year full-time course leading to MSc by examination, with lectures, practical work and a research project on topics including drug interaction and standardisation, biopharmaceutics, quality control, administration, organisation of the health and social services, and the storage and retrieval of drug information.

A part-time MSc in pharmaceutical subjects may also be undertaken by research. (Professor P. F. D'Arcy, Department of Pharmacy, Queen's University of Belfast, Belfast, Northern Ireland).

University of Bradford

MPharm in clinical pharmacy—Two-year course, two days per week (or one year full-time), intended primarily for pharmacists employed in hospitals although much of the course would be of value to others, for example research workers in industry working on the biological evaluation of dosage forms.

The course covers pathology, pharmacokinetics, biopharmaceutics, biochemistry, drug metabolism and pharmacology and clinical studies with practical work mainly in the hospital environment.

MSc in experimental pharmacology—one year full-time course covering quantitative pharmacology, toxicology, psychopharmacology and a research project. (The Secretary, Undergraduate and Post-graduate School of Studies in Pharmacy, University of Bradford, Bradford, Yorkshire).

Chelsea College, University of London

MSc in biopharmacy—Two-year course, with lectures and practical work one afternoon and two evenings per week, covering the properties and uses of drugs with reference to their metabolism and toxicity, designed to be of particular interest to hospital pharmacists and those engaged in the preparation of technical literature.

MSc in pharmaceutical analysis and quality control—Two-year course of lectures, laboratory work, a reading assignment and a dissertation, occupying one whole day and one evening each week.

MSc in pharmaceutical technology—A part-time two-year course (or one-year full-time) on pharmaceutical formulation, including packaging science and microbiology and intended for industrial and hospital pharmacists. At Chelsea College Annexe, Hammersmith, special laboratories have been designed for the course which is recognised by the Pharmaceutical Society as contributing six months towards the pre-registration training.

(Secretary, Department of Pharmacy, Chelsea College, Manresa Road, London SW3).

MSc in biochemistry—Part-time two-year

course in the Department of Biochemistry covering the basic principles of biochemistry for graduates in other scientific fields. *MSc in immunology*—Two-year course one day per week in the Department of Physiology, intended mainly for graduates working in industry.

The following evening courses will also be arranged:

Autumn term: Recent development in immunology and allergy. Spring term 1974: Drugs and the skin.

The City University, London

MSc in information science—One year full-time course (also offered by the University of Sheffield) on the collection, collation, evaluation and dissemination of information including preparation of abstracts, technical writing and translating. A two-year course, one day per week, leading to a diploma, is also available. (The City University, St John Street, London EC1V 4PB).

Heriot-Watt University, Edinburgh

MSc in hospital pharmacy—Two-year course, two days per week (or one year full-time). Facilities also exist to study for the degrees of MSc and PhD part-time by research.

The course is designed for those employed in hospital pharmacy; topics covered include administration, applications of computers in hospital pharmacy and the storage and retrieval of drug information. The student also submits a thesis, usually on a problem relating to the hospital service.

(Professor A. R. Rogers, Department of Pharmacy, Heriot-Watt University, 79 Grassmarket, Edinburgh).

City of Leicester Polytechnic

Diploma in applied pharmacology—Two-year course, two days a week, aimed to provide a sufficient understanding of therapeutics for pharmacists to be employable on hospital wards in an advisory role. Lectures are devoted to the pathophysiology of common diseases and the therapeutic utilisation of the interaction between drugs and diseased tissues. Practical work is divided between the pharmacology laboratories of the school and attendance at a clinic in a local hospital, and a project is undertaken.

(Dr B. J. Northover, School of Pharmacy, City of Leicester Polytechnic, PO Box 143, Leicester).

Liverpool Polytechnic

M Phil and PhD by part-time research organised through the Council for National Academic Awards. The student registers with the CNAA and has an academic supervisor at the college. He spends time at the college on a day-release basis from his employment which is usually in a hospital or industry. (Mr N. H. Booth, School of Pharmacy, Liverpool Polytechnic, Liverpool L3 3AF, CNAA, 3 Devonshire Street, London W1N 2BA).

University of Manchester

MSc in hospital pharmacy—One-year, full time course with lectures on quality control, pharmaceutical chemistry, biopharmaceutics, and pharmacokinetics, pharmacology and therapeutics, physical pharmacy, radiopharmacy, pharmaceutical microbiology and administration. A written exam-

ination is held at the end of the Lent term and the remaining time is devoted to a research project.

MSc in pharmaceutical analysis—Two year course two days per week (maybe full time from October 1974) with lectures, practicals and a project leading to a thesis. Considerable emphasis is placed on automation and data processing.

(Dr G. G. Benson, Department of Pharmacy.)

North East London Polytechnic

MSc in pharmacology—Two year course, two afternoons and evenings a week, involving a study of the action of drugs on the central and autonomic nervous systems, the toxicity of drugs and food additives and delayed hypersensitivity reactions.

(North East London Polytechnic, Romford Road, London E15 4LZ).

University of Nottingham

There are no regular part-time degree

courses apart from a scholarship held by only one person at a time and awarded by the Sheffield Regional Hospital Board. The holder of the scholarship works half-time at the university and half-time in a hospital of his choice and submits a thesis for an *MPhil degree*.

(Professor J. Crossland, Department of Pharmacy, University of Nottingham.)

Portsmouth Polytechnic

MPhil and PhD by part-time research arranged through the CNAA.

(Dr F. Perks, School of Pharmacy, Portsmouth Polytechnic, King Henry I Street, Portsmouth).

University of Strathclyde

MSc in pharmaceutical analysis—One year full-time course designed for pharmacists in analytical research and control laboratories, covering the methods available for the detection, determination and quality control of pharmaceuticals.

MSc in forensic science—One year full-time course for graduates wishing to work in Police, Home Office and toxicology laboratories. Lecture topics include detection in body fluids of poisoning agents and drugs of dependence, identification of hairs and animal tissues, blood grouping and applications in cases of disputed paternity, criminal law and court procedure.

MSc in pharmacology—Full-time course of any four terms over one or two years, intended primarily for pharmacists in industry or academic pharmacology. Candidates take theory and practical examinations and present a thesis.

MSc or PhD in pharmaceutical technology—Supervised research in hospital pharmacy over one or two years (MSc) or three years (PhD) may be undertaken both in the university and at Glasgow Royal Infirmary.

(Professor J. B. Stenlake, Department of Pharmaceutical Chemistry, Royal College Building, George Street, Glasgow.)

2. Refresher and specialist courses

Anglia region: A refresher course will be held in Norwich at the end of October, details not yet finalised.

Bath and west of England: Refresher courses planned are:— Quality control of drugs (September), Recent advances in pharmaceutical sciences (November). Stability of drugs and dispensed medicines (March), Absorption, distribution, metabolism and excretion of drugs (April).

Belfast: Refresher courses to be held in the Department of Pharmacy, Queen's University of Belfast, are: A symposium with general medical practitioners, October 31, on Medicine and pharmacy; the sessional lecture in November on a topic chosen by a pharmaceutical celebrity; eight weekly lectures from January to March 1974 on Recent advances in pharmaceutical sciences; four lectures on pharmaceutical legislation during April and May 1974; one or two week-end courses during the Easter and summer vacations 1974, and a further symposium held later during the session on a theme of pharmaceutical interest.

Border: Two evening courses planned for the autumn and spring at Sunderland Polytechnic are Current trends in pharmacology (eight weeks), and Drug interactions (six weeks).

Chiltern: A refresher course on "steroids", March 1974 in association with Chelsea College.

Mercia: Conference on European pharmacy and manpower, Leicester post-graduate medical centre, Leicester Royal Infirmary, October 28, 10.30 am. Details from W. Taylor, 3 New Way Road, Leicester.

Course on skin and scalp dermatology at the centre, October 8, 15, 22 and November 5, 12, 26. The lectures will be repeated at Northampton in the autumn and in Cambridge as a joint project with the Anglia region, spring 1974. Further lectures on a different subject, not yet finalised, will take place on January 21, 28, February 4, 25 and March 4, 1974.

Merseyside and North Wales: Refresher course on Aspects of current therapeutics,

Wirral Mercury Motel, October 12-14. Details from G. Smith, 67 Lynton Road, Birkdale, Southport.

North Western: Refresher course for pharmacists intending to return to general practice. Eight successive Wednesday morning and afternoon lectures at Manchester University, commencing October 10, will cover new legislation, Drug Tariff, pharmacy of specific groups of drugs, topical corticosteroids, current works of reference, hospital structure and management, and area reorganisation of the NHS. Details from Dr G. G. Benson, Pharmacy Department, Manchester University.

Rhanbarth de Cymru: Course on veterinary pharmacy at Monmouthshire College of Agriculture, Usk, July 16-19, fee £50, inclusive of all meals and accommodation. Topics include animal husbandry, modern farming methods and treatment of mastitis, internal parasites and coccidiosis. Details from Dr N. A. Armstrong, Welsh School of Pharmacy, UWIST, King Edward VII Avenue, Cardiff CF1 3NU.

Sherwood: A course at the East Gate Hotel, Lincoln, on October 14, Design and mode of action of drugs, design of preparations and problems associated with generic equivalence. October 21, Rheumatology. October 28, Contraceptives. Reorganisation of the NHS and recent legislation affecting pharmacy. Details from Miss G. M. Watson, 36 Queen's Drive, Beeston, Nottingham.

A one-week's residential refresher course for hospital pharmacists is held every Easter Vacation at Nottingham University, primarily for those employed by the Sheffield Regional Board.

South East England: Refresher course on physiology and pharmacology of the central nervous system and some biopharmacy, Varley Hall of Residence, Coldean Lane, Brighton, September 11-14. There will also be a course in quality control for hospital pharmacists July 10-13. Details from P. S. Cowley, School of Pharmacy, Brighton Polytechnic, Lewes Road, Moulsecoomb, Brighton. BN3 4GJ. A series of lectures

will be held in January, February and March 1974 at three centres, probably on Drugs and geriatrics and Drugs and paediatrics.

Wessex: Similar courses to those held at Portsmouth, Bournemouth and Reading during the past year are planned for the Reading and Woking area, probably in October or November, details not yet finalised.

West Midland: A course at the North Staffs Medical Institute, Stoke-on-Trent, on Tuesdays at 8 pm from October 9-November 27 inclusive, fee £5. Topics will include absorption and excretion of drugs, bio-availability, and new pharmacy legislation. The course will be repeated in Worcester at about the same time and the West Midlands Group are to organise a course in Coventry during the autumn and spring.

Yorkshire: A course held at Bradford in May on corticosteroids and economic aspects of pharmaceutical industry and the NHS will be repeated later in the year at another centre within the region.

A one-day symposium, September 16, organised by the postgraduate School in Pharmacology in association with Hoechst Pharmaceuticals will deal with diuretics and the control of diabetes using oral hypoglycaemic agents.

Pharmaceutics book

Students taking pharmaceutics up to part 1 of the pharmacy degree course will find much useful information in the sixth edition of Cooper and Gunn's "Tutorial Pharmacy," published last year (Pitman Medical, 39 Parker St, London WC2B 5PB, pp 471, £5.50).

The book is divided into five sections—physical pharmaceutics; pharmaceutical technology including packaging, heat transfer, size reduction and other manufacturing processes; biological pharmacy including microbiology, immunology and antibiotics; ligatures and sutures; and radioactive isotopes—with an appendix on forces between molecules, ions and atoms.

Information is presented clearly and concisely and the text is illustrated throughout by simple line drawings.

CAREERS IN PHARMACY

Research in general practice pharmacy

The 1971 Branch Representative's meeting resolved that the Council of the Pharmaceutical Society should examine the possibility of encouraging pharmacists in general practice to participate in some study into aspects of pharmacy practice.

In response to this request the Council compiled an extensive list of topics available to any pharmacist seeking guidance on the type of problem that might usefully be tackled. The ultimate aim would be publication of the results and, if the project was sufficiently detailed and sophisticated, the work could lead to an MSc or FPS.

The Council has asked each regional committee to establish a panel comprised of two academic and two general practice pharmacists. Members interested in undertaking a project can apply to their panel for advice through the regional secretary. The panel will be able to give guidance on the choice of topic and its suitability for further qualification.

Further information from regional secretaries or the Secretary and Registrar, Pharmaceutical Society, 17 Bloomsbury Square, London WC1A 2NN, or the Resi-

dent Secretary in Scotland, Pharmaceutical Society, 36 York Place, Edinburgh.

Pharmacy sandwich course

The University of Bradford offers Special Honours, General Honours or Ordinary degrees which may be obtained either by a sandwich or continuous course. The University is the first in Great Britain to offer a sandwich course in pharmacy and the main objective is the close integration of practical and academic studies. Places of employment in retail, hospital or industrial pharmacy are initially approved and each student is visited by a tutor during his periods of training. The sandwich student acquires first-hand experience of the practice of pharmacy during the course and thus benefits more fully from his university studies.

Since it involves two six-month periods of practical training, the sandwich course is of four years duration but the practical periods fulfil the pre-registration requirements of the Pharmaceutical Society.

In the first year lectures are given by specialists on topics such as career patterns in the various branches of pharmacy, the structure of government, local and voluntary social and health-related services and health education. Pharmacological instruction includes lectures by visiting clinicians and attendance at general practitioners' surgeries and hospital ward-rounds.

The final year of each course includes lectures on administration, organisation and management functions involved in retail, hospital and industrial pharmacy and pharmaceutical systems in other countries.

The General Honours course is prim-

arily intended to prepare students for careers in retail, commercial or hospital pharmacy, whereas the Special Honours course is primarily designed to equip students for research, development and production work in industry.

Towards a more professional future

Continued from p767

envise the total dispensing function under complete medical control.

Unless the pharmacist works aggressively towards defining and accepting a complete professional outlet for the practice of his skills the future outlook for the young graduate can be viewed as bleak indeed.

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KINGS College Hospital Group

King's College Hospital is associated with four local hospitals to form a Teaching Hospital Group of over 1,800 beds, with an annual out-patient attendance of 400,000.

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Market News

CAFFEINE FIRMER

London, June 6: Caffeine prices have risen by £0.57 kg during the week. Also dearer is oleic acid BP because of the rising cost of tallow and further increases are expected shortly. Paraffin liquid is unchanged but the soft varieties have been raised by almost 20 per cent.

In crude drugs the market was almost stagnant. Pepper provided the main talking point and that due to currency speculation for future supplies. Similar reasoning may have been behind some of the forward offers of essential oils. Anise, Brazilian peppermint and petitgrain oils were quoted forward at the same rate as spot holders were willing to do business. Eucalyptus was un-

quoted but offers of bois de rose were resumed in the cif position.

Balsam Peru, kola nuts and hydrastis were firmer by about £0.10 kg in both positions.

Pharmaceutical chemicals

Acetic acid: 12-ton lots, delivered, per metric ton, BPC glacial £94; 99.5 per cent technical £87; 80 per cent grades pure £82.50; technical £75.

Benzoic acid: One-metric ton lots £30.42 kg.

Borax: BP grades, per metric ton, in paper bags delivered—granular £112; crystals £154; powder £122; extra fine powder £126. Technical grades less £24 per ton.

Boric acid: BP grade per metric ton; granular £110; crystals £154; powder £122; extra-fine powder £126 in paper bags, carriage paid. Technical is £24 per 1,000 kg less than BP grades.

Caffeine. (50 mg) Anhydrous and hydrate £2.35 kg. **Citric acid:** BP granular hydrate per metric ton 50-kg lots, £337; 250-kg £325; 1,000-kg £313. Anhydrous £385, £346, £334 respectively. Premium for powder £10.

Gallic acid: 1,000-kg lots £1.68 kg.

Glucose. (per metric ton in 10-ton lots), monohydrate powder £94; anhydrous £175; liquid 43° Baume £79 (5-drum lots).

Lactic acid: £570 metric ton for 50-kg lots.

Mercury salts: Per kg in 50-kg lots; ammoniated powder £5.15; oxides—yellow £5.90 and red £6.10; perchloride £4.30; subchloride £5.45; iodide £5.70 kg for 25-kg.

Mersalyl: Acid £15.75 per kg; sodium £21.50.

Oleic acid: BP £254.70 per metric ton delivered.

Oxalic acid: 20-ton lots about £145 metric ton.

Paraffins: (minimum 1-ton lots) liquid-BP £0.552

gal; light BPC 1963 £0.466; technical white oil WA23 £0.422; WA21 £0.477; Jelly-soft white BP £138 ton; yellow BP £103.

Pyrogallic acid: Pure 500-kg lots £4.92 kg.

Salicylic acid: Per metric ton 5-ton lots £445; 1-ton £470; 250-kg £520.

Sorbitol: Powder £370 metric ton for over 250 kg; Syrup to £152.

Tannic acid: 500-kg fluffy £1.40 kg; powder £1.38.

Tartaric acid: (Per metric ton) 50-kg lots £511.50; 250-kg £506; 1-ton £497.50.

Zinc carbonate: BPC 25-kg sacks £0.25 kg.

Zinc chloride: Granular 96-98% £140 metric ton.

Zinc sulphate: Heptahydrate £54 metric ton.

Crude drugs

Balsams: (kg) Canada £4.50 nominal; shipment £4.35, cif. **Cobaiba:** BPC £1.20 Para, £0.90. **Peru:** £2.15; £2.05, cif. **Tolu:** BP £1.70, spot.

Hydrastis: Spot £3.40 lb; £3.25, cif.

Kola nuts: West African halves £115; shipment £97 metric ton, cif.

Pepper: (ton) Prompt shipment Sarawak black £405, cif. White £620, cif.

Essential and expressed oils

Anise: Chinese spot and cif £2.00 kg.

Bois de rose: £6.50 kg, cif, July-August.

Eucalyptus: No offers.

Lemongrass: No spot offers; £2.55, cif.

Peppermint: (per kg) Arvensis Chinese spot £2.80; forward £2.90. Brazilian spot and cif £1.85. American piperata from £6.65, cif.

Petitgrain: Spot and cif £6.80 kg.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax.

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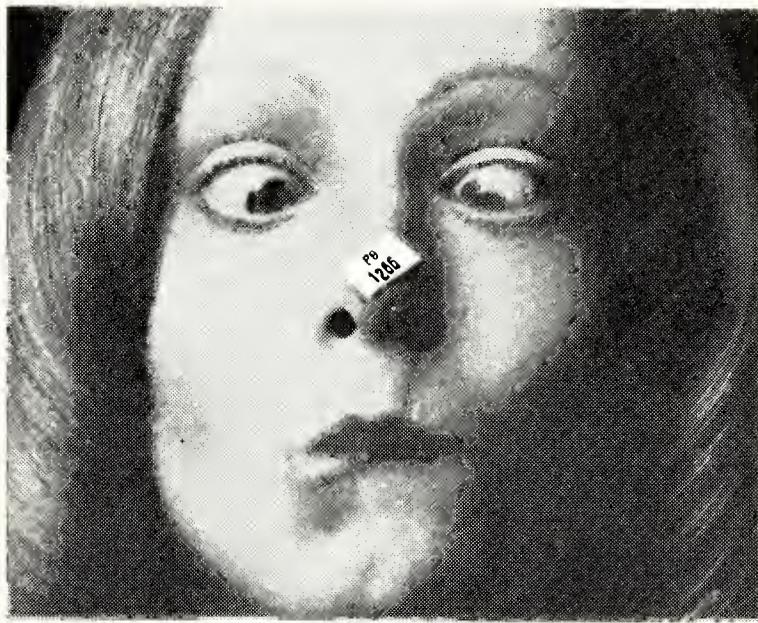
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WINTHROP

Beauty Business



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**THE FEMININE WAY TO REMOVE UNWANTED HAIR —
THE EASIEST WAY TO INCREASE PROFIT**

'Mad Dogs and Englishmen'

It is not without reason that most Europeans think we English go berserk at the first sight of sun. A white cardigan and a handkerchief placed on the head is no longer the way to recognise the British abroad, but by simply spotting the lobster-like body lying out in the midday sun, regardless of warnings and contrasting with the natives who sensibly take a siesta. So be sure that such products as Sylvasun tablets, which are claimed to prevent sunburn, and various soothing emollients are being displayed to their best advantage around this time!

But tan or not, most Summer looks just now are golden and glowing—such as the Maybelline girl with the pretty straw hat. A warm beige foundation with a soft blusher has been used to give a gentle glow to the complexion, one of Maybelline's Frosty stick eye shadows in the Gentle Green shade has been used on the lid with Daffodil on the brown bone, lots of Great Lash mascara and a pearly apricot-coloured lipstick to complete the look.

Yardley recommend the use of plenty of Nature Lipids Cream Moisturiser to prepare the face for Summer makeup. They also advise a light foundation such as Second Nature Deep Almond, while the complexion is warmed with Tawny Blush O' Colour. Eye makeup is also kept light, but vivid, with Seaspell over lid and socket and swept just under the lower lashes, Milkshake Soul Set eyeshadow under the brow and a toning shade of Seawink mascara. Coral Dreamer lipstick with Coral Pot Gloss on top is the final touch.

Douglas Young at Max Factor creates his summer face with the California range of products which have recently been ex-

tended. California Face Glosser has been used for a soft, gleaming complexion, Clearly Azure Eye Glosser all over the eye and a touch of pink Cheek 'n' Lip gloss for a glow on the cheeks and lips.

The waterproof face

Pink-eyed insignificance is the fate of most people on the beach unless they find a waterproof mascara that really works.

One process which deals with that naked no-lash look is an eyelash dye called Dylash from Lon (UK) Ltd. Dylash contains vegetable dyes and has—say Lon—been subjected to vigorous safety tests. It is first mixed with a few drops of 10vol. peroxide and should then be applied to the eyelashes, keeping the eyes closed, in order to facilitate the application of the colouring to the upper and lower lashes simultaneously. The mixture should be left on from 5 to 8 minutes after applying and then rinsed off with warm water. Dylash can also be used on eyebrows. The company say the colour will last until the eyelashes grow out, which normally takes from six to eight weeks. Each tube costs 80p, enough for 12 applications, and it comes in three colours: black, blue and brown.

Summer smells

Two new perfumes to be launched in September are Windsong from Prince Matchabelli and Charlie from Revlon.

Windsong is said to be "slightly more romantic than Cachet" and should therefore appeal to a much wider age group.

Charlie is described as being fresh, full of surprises and—say Revlon—for "independent girls who know when to cling!"

The Happy Variations look by Juvena with makeup to suit either Delia (left) with auburn hair, Micky (centre) fair and blonde and Jacki (right) with dark hair and olive complexion.



Beauty Business

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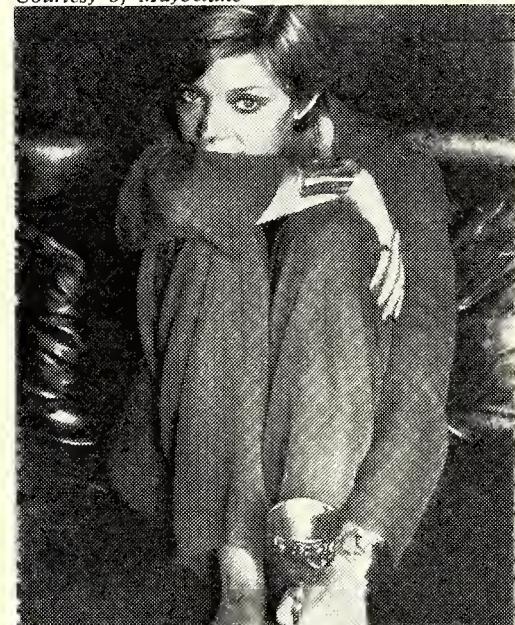
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Courtesy of Maybelline



Courtesy of Revlon



Courtesy of Yardley



Courtesy of Max Factor

FACING THE SUN

by Elizabeth Anderson

Do you know that our Anglo-Saxon skins, probably due to our weather conditions, are often highly sensitive, and should never face the sun without the plus-protection of a suntan preparation?

You, as a salesgirl in the beauty business, should know all these things—plus a little more general background gen if you are going to sell suntan preparations successfully and authoritatively this summer season.

Most important thing for you to know is that the summer sun has the power to burn as well as to tan, but that if the right kind of cosmetic preparations are used, this power can be harnessed to ensure a pain-free, pretty suntan.

The sun's light rays are measured by Angstrom units (named after a Swedish physicist—A. J. Angstrom—who contributed much to the world's understanding of solar radiation.) The longer waves, from 7,800 to 120,000 AU are infra red, whilst those from 400 to 7,800 AU provide visible light. The ultra violet zone from 1,000 to 4,000 AU, includes the rays that cause sunburn (usually 2,800 to 3,100 AU) and those that cause tanning overlap from 3,000 to 3,800 AU.

Fundamentally what happens when the skin is exposed to the sun is that its natural pigment, melanin, increases.

Freckles are the result of a spotty distribution of melanin, whilst those rare, fair

Do you know that the ultraviolet rays of the sun are divided into rays that tan and rays that burn?

Do you know that it is a pigment lying under the surface of the skin known as 'melanin' that makes you brown?

The following A-Z spells out each product's selling features:—
Ambre Solaire—one of the original Riviera suntan preparations—offers for summer 1973 an Oil, Creme, Moisturising Lotion and a Mouse as well as Oil Free Ambre Solaire, and Duo Tan which tans in or out of the sun. Ambre Solaire also market Apres Soleil which helps to prolong a tan by keeping the skin soothed.

Bonne Bell have added a new product this year, Sun Bloc, a non-greasy, non-drying invisible cream which gives protection against the burning and tanning rays of the sun. Bonne Bell also have Tanning Gel for people who find it easy to go brown and this Gel promotes a rich, deep tan. Like most Houses they also have an After Sun Moisturiser—called After Sun Lotion—formulated to restore the dewy look that the sun can take away.

Charles of the Ritz say "bronze is beautiful" and have extended their range to incorporate a new Ritz Sun Bronze for sun-sensitive skins, known as Super Filter. They also make Protective Creme for the face in two formulas of sun screening.

Because the face is exposed to the sun more frequently than any other part of the body it requires greater protection. This moisturising gel provides an extra-lubricating protective formula with limited sun screen to allow a smooth even tan. The

Courtesy Max Factor

people who never tan at all just don't have much natural pigmentation. The more pigmentation the skin possesses the better it is protected (the larger proportion of melanin in the skins of darker races, for instance, makes them rare sunburn casualties).

Let's make a quick market round-up of the suntan preparations you could be selling this year, and add some counter pointers to help you recommend the right product to the right customer.



Extra Protective Creme is formulated in the same way as Protective Creme but has a much higher screening for sensitive skins. Charles of the Ritz again have an After Sun Moisturiser—a luxuriant lotion for the body with moisturising and emollient qualities to help to restore natural moistures after sunbathing.

Elizabeth Arden introduces her Sun care Specifics this year—new treatment tanning products to provide protection

for individual skin types. Arden recommend Sun Tan Cream or Sun Tan Lotion for a golden tan, or, for a rich dark tan, their Sun Gelée. For maximum "spot" protection they have a Sun Shield Stick designed specifically for ultra-sensitive areas like the nose, knees, ears and shoulders, which are the most vulnerable to burning and peeling. These strategic spots need maximum filter protection and with this stick it can be quickly and easily applied to any area that is super-sensitive. **Fontarel**—famous for their skin-cherishing cosmetics—have a suntan cream called "Monitor" which can be recommended for all skin types, even the most fragile ones. It contains a selective filter carefully formulated to prevent any irritation.

Helena Rubinstein currently have a trio of suntan preparations. Sandy Tan which is a rich creamy moisturising emulsion. After Tan Beauty which encourages and prolongs a golden tan, and their Tan-in-a-Minute which is a liquid make-up to give your face and body a wonderful colour. It also helps to protect against sunburn and, although it will not come off in salt water, it is easily removed with soap and water or a cleansing cream.

Innoxa—understanding the problems of the pale delicate skin which never goes brown but can suffer greatly from sunburn—have Kerodex 12W Total Sun Deflectant Cream. This is an amalgamation of their two original Sun Deflectant Creams. 11D and 12W. Now they have combined the best of both creams into an updated formula that cuts out a wide spectrum of the sun's harmful rays. This cream gives complete protection to the skin and permits no burning, no browning, no tanning and no harmful side-effects.

It is for all skins that want to enjoy the privilege of stripping off for summer without the distress and misery that bareness previously entailed. It loses none of its protective qualities when worn under normal make-up. It should be applied to clean, dry skin and, as it is waterproof, is ideal for swimmers. It will protect completely during sports and outdoor activities, even when the skin perspires freely. And it will blend unobtrusively into the skin, like a vanishing cream, because it is non-tinted. **Leichner** have a Professional make-up range that can turn limbs and bodies toast brown with never a ray of sunshine. The best known is Island Tan which is a straightforward tinted tanning cream which protects against sunburn, lets the skin tan naturally, and all the while gives a glowing film of suntan colouring to the entire body. It comes in three shades—Blonde, Brunette and Summertan. (of which Summertan is the deepest). Tan Klear—not so familiar to all of you, perhaps, but widely used in the theatre gives instant golden colour to arms and legs. Looks marvellous out of doors, too. It's a clear, tinted liquid which is rubbed onto the skin with a dampened sponge, blended and smoothed until no streaks are visible, and then left to dry.

Mary Quant launched Topspeed Tan last year. This is a fake tan which contains its own sunscreen and it is joined this year by two newcomers—Sunshine Oil, a super light oil to spray on all over, which leaves the skin silky soft and ready to tan, and Redskin Relief, a gentle cooling foam that soothes thirsty sun-dried skins.

Max Factor—Developed their suntan range



Illustration courtesy of Estee Lauder

in America's "land of sunshine" and called them California Bronze. There is a California Bronze Suntan Creme, California Bronze Suntan Lotion, California Bronze Suntan Oil and a California Bronze Tinted Suntan Lotion, which gives a light brown look to the skin.

Nivea recommend their range as ideal for all the family. The range consists of a Sunfilta Foam in an aerosol, Sunfilta Cream, Sunfilta Milk and, of course, an After Sun Soother.

Orlane add, for 1973, a Gelée Anti-Solaire designed for dry and sensitive skins. It is a transparent tinted jelly which gives a slight suntan colour to the skin but is non-greasy and forms a protective film. It also contains powerful moisturising agents which counteract the dehydrating effects of the sun. Orlane also have Sol a Sol to prolong a tan, an after-sun emulsion with a soothing serum as its base, and containing deeply moisturising elements and a substance which conserves a natural tan even when the skin is not exposed to the sun. It should be applied daily.

Outdoor Girl whose Tanfantastic has sold very well has added Tanfantastic Xtra Lotion to their ranks. A double strength fake tanning lotion that's gently moisturising and also containing a sun screen to prevent burning.

Illustration courtesy of Ambre Solaire



Q.T. introduce this year Sudden Tan. Not just a bronzer and not just a tanner, Sudden Tan is both. Added to that it has a sunscreen to help protect sensitive skin tones from burning and, with its built-in blend of richly concentrated moisturisers, will soften, smooth and protect the skin in the hottest sunlight.

Sudden Tan is simple to apply from the travel size foam can. Just apply a little foam bronzer onto your palm and blend over your face, legs and arms or onto your body. Remember to wash your hands immediately after application—Sudden Tan works suddenly!

Skol offers sun lovers two ranges: the original budget-priced Lotion, Oil and Cream, and the luxury Sungold range. Both the Skol and Skol Sungold ranges have been developed to provide the protection necessary whilst the skin develops its natural defence against burning and enables it to turn a glorious brown.

For the lucky ones who tan easily their oils are particularly suitable in very hot climates as each application lasts longer. Oils are the favourite among the sun sizzlers, as they love the healthy sheen oils give the skin. They are suitable for all normal skins and Sungold comes in an aerosol container with a fine spray that makes application easier and more efficient by covering the skin evenly to give better protection. They suggest lotions as the favourite of those with normal to slightly oily skins, and those who simply prefer the dry feel of this type of suntan preparation. Sungold has been formulated to discourage sand pick-up and is packed in a specially designed 'pistol-grip' bottle.

Sungold and Skol Cremes are designed for dry skins which need slightly more protection from the sun. They are ideal in extremely hot conditions: additionally the Sungold formula contains two different kinds of sun screening agents to give the optimum level of protection compatible with rapid tanning. It has a light consistency for easy application and is, again, packed in a 'pistol-grip' plastic bottle.

Sungold Moisturising Sun Tan Creme is made for people with more than usually sensitive skins, who tend to burn very easily, and therefore need a suntan preparation to screen out a higher percentage of the sun's rays, without giving them so much protection that they cannot tan at all.

It contains double the normal amount of sun screen, a skin moisturiser to counteract the drying effect of the sun and the wind, and a skin regenerator to stimulate a healthy tissue formulation. It is specially suitable for children.

Note: This creme is not designed for those whose skin is hyper-sensitive and reacts to any form of sunlight. Such people should take medical advice about sunbathing, before going on holiday.

Sylvasun—is the name of the revolutionary anti-sunburn tablet. It may sound strange that swallowing a tablet can offer protection against the harmful effects of the sun's rays, but it has been on sale in the UK since 1967 and its sales increase regularly.

Sylvasun works by stimulating the body's own natural defence mechanisms, thus helping the skin to protect itself by the normal tanning process. Its principle ingredients are vitamin A (25,000 i.u. per tablet) and calcium carbonate (120 mg per

tablet). The amount of vitamin A contained in each tablet is higher than the body's "normal" requirement for this vitamin. The reason for this is the fact that extra demands for this vitamin are placed upon the body during exposure to the sun. As the ingredients in Sylvasun are not foreign to the body, the product is, therefore, said to be perfectly safe in the dosages recommended.

It is recommended that the course is begun two days prior to exposure to the sun. The minimum recommended dosage for adults is one tablet, by mouth, early morning and early afternoon: the maximum recommended dosage (for adults with extra-sensitive skins) is four tablets per day for no longer than a period of fourteen days. But for children between the ages of 6 and 12 the maximum recommended dosage is one tablet per day for a fourteen day period, and it is *not* recommended for use during pregnancy or for infants and children under 6 years of age. *Uvistat* range includes not only a cream sunscreen but also a sunscreen for lips, and they call it the prescription for suntan without tears! It is powerful enough to protect anyone under the sun, yet bland and mild enough even for babies.

Tan planning

However eager one is to achieve a good overall suntan, tanning sessions should definitely be carefully timed. For a *safe* tan recommend that your sun-worshipping customers follow this sensible five point tan plan.

1. Built up a tan *gradually*. Certainly no more than 15 minutes on the first day. It's the secret to a lasting tan.
2. Never sunbathe when the sun is at its zenith between 12 and 2 pm.
3. Use a reliable sun screener.
4. Always reapply a sun screener after swimming. The sun's rays can be especially cruel to salty skins.
5. Moisturise! Come sundown always apply a moisturiser to help keep the skin cooled and supple. A good moisturiser will help prevent peeling and make a tan last longer.

One should remember that the object of sunbathing is to achieve a flattering skin tone and a feeling of health and well-being. Over-indulge and one can end up with a sensitive skin, dried-up and as wrinkled as an old kipper.

Also important is to choose the kind of product best suited to the skin type. Here it will be helpful to study the Tan Planner that Ambre Solaire designed for us, (see right) and which can be obtained for yourself in a shortened version direct from Ambre Solaire Advisory Service, 18 Bruton Street, London W1A 1BX.

From this it is child's play to choose an Ambre Solaire product designed for a specific skin type or to recommend preparations for children or for fake tans whatever the skin type.

Plus sales on the summer counter

For those poor souls who have over-indulged in the sun, and there will always be some who ignore the warnings and have collected a dose of sunburn, an overnight treatment with Elizabeth Arden's fabulous Eight Hour Cream is wonderfully soothing and healing. Arden recommend that maidens too generously sun-kissed



Illustration by courtesy of SkoI

SKIN TYPE	SENSITIVITY TO THE SUN			Children	Tans in/ out of sun	After Sun	
	Burns Easily	Norinal Reaction	Seldom Burns				
DRY AND MATURE	Creme	Creme	Moisturising Lotion	Creme	Duo-Tan	Apres Soleil	
	Oil	Oil	Mousse		Creme or Moistur- ising Lotion		
		Moisturising Lotion			Lotion or Aerosol		
NORMAL	Creme	Creme	Oil-free Lotion	Creme Lotion or Mousse	Creme Lotion or Aerosol	Apres Soleil	
	Oil	Oil	Lotion				
	Mousse	Moisturising Lotion					
GREASY	Creme	Moisturising Lotion	Oil-free Lotion	Creme Lotion or Mousse	Creme Lotion or Aerosol	Apres Soleil	
	Mousse	Mousse					
		Oil-free Lotion					



Courtesy of Scholl

would be wise to anoint themselves with Eight Hour Cream and keep under cover for twenty-four hours. After that an application of their Soothing Lotion will help to keep the skin cool and disguise any redness.

Blondes will undoubtedly think of going

even more blonde in the sun. Golden hair and golden sun seem to go together. Clairol's Summer Blonde, recommended as the "gentle hair lightener" is designed to give you a headstart—or help you to keep your hair colour the way you want.

When the heat of the midday sun makes you lose your cool there is nothing like a fresh shower down with super toiletries. Kiku's new lightweight holiday pack—the Kiku Kooler Kit—is perfect travel companion, holding Splash-on Cologne and silky bath powder both perfumed with the lovely Kiku fragrance.

Too many hours spent revelling in salt water and sunlight on a hot beach can result in hair that is brittle, dull and sticky. A course of a good hair conditioner will prevent tangles and keep hair sleek and glossy. Inecto's Peach Nut oil hair conditioner is excellent used after a shampoo, or suggest one of the new Silvikrin shampoos formulated for different hair types, each with its own built-in conditioner. Here's wishing you all a happy, sunny Summer, with lots of suntan sales!

Bidex is different from other intimate deodorants. To begin with, it was developed with the help of gynaecologists. Next, it has a unique base of special oils which make it softer. Sprayed from the recommended 6 inches, it doesn't sting and isn't uncomfortably drying. Then—very



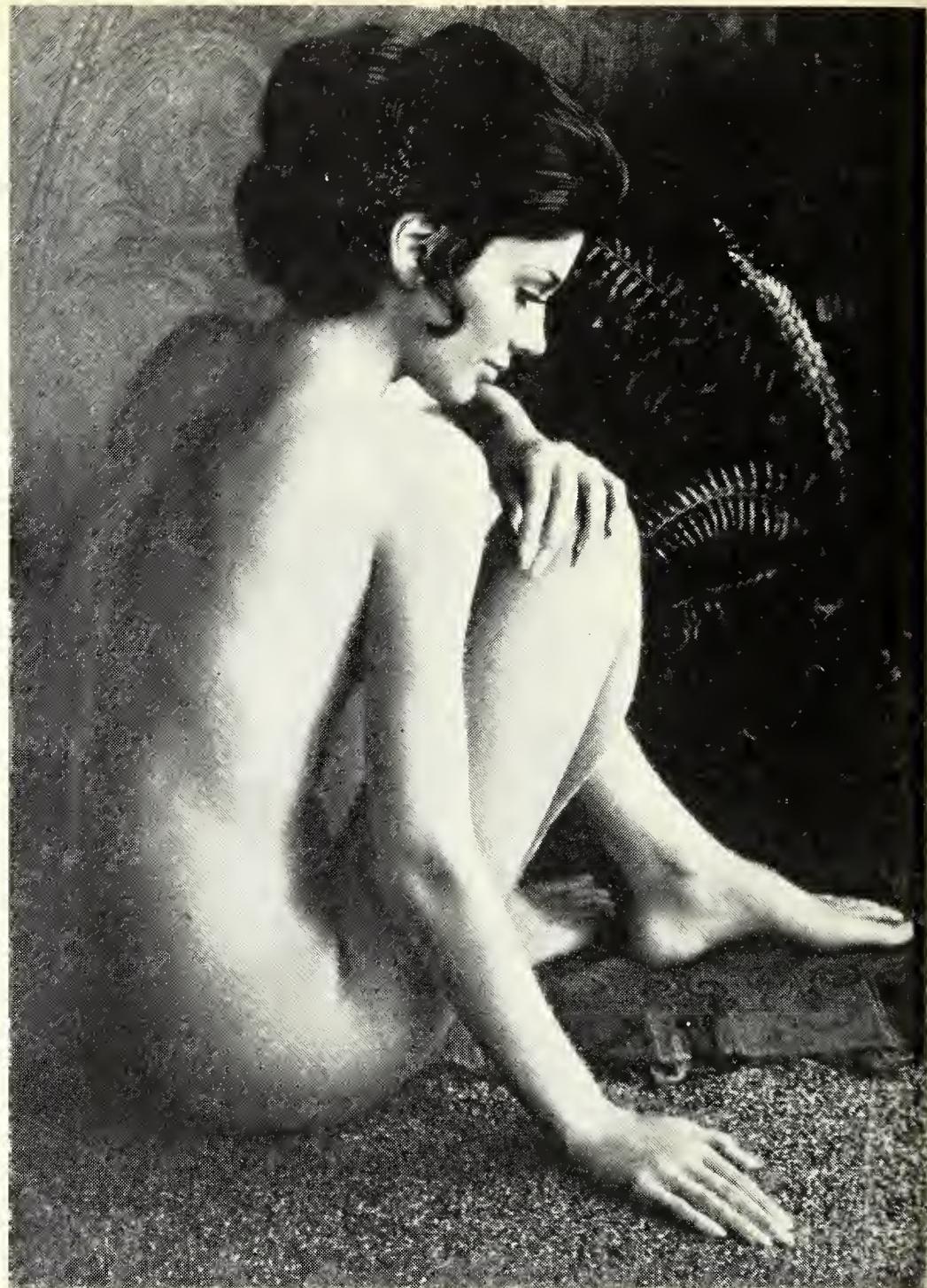
important—the patented Bidex formula works for up to 12 hours at a time, ensuring all-day protection. It gives soft care to sensitive skin, and comes in a choice of delicate fragrances.

So if you're asked to recommend the really gentle and effective deodorant, you know what to say.



Bidex.
Because you want all the softness you can get.

BODY BEACH SCENE



There is nothing like the sun for a general lifting of spirits and for casting them down again if what the sun reveals is "greyish" goosepimply flesh and hair in all the wrong places! The summer can be merciless in exposing what winter woollies have allowed many to ignore for so long. And although a tan can usually work miracles for a not-so-perfect figure or skin, those all-revealing first days still have to be faced. Here are some suggestions to pass on to customers on how to face the stripping with confidence!

THE general tone of the skin can be greatly improved by regular "rub-downs" at bath-time with a loofah or hand-glove followed by an all-over splash of eau de Cologne or cold water and a rich body lotion. Particular attention should be paid to the backs of heels, knee caps, elbows and tops of thighs which often require an extra-rich nourishing cream such as Vaseline Intensive Care Lotion or Scholl's Skin Food.

Removing unwanted hair should be just as simple. The main problem is deciding upon the method and the requirements of the individual. Unfortunately there are

still many women who regard the removal of unwanted hair as "unnatural" and a practice which will only result in the hair growing back much thicker and darker. They seem prepared to endure the embarrassment they feel at facial hair, for instance, rather than remove it simply and efficiently—which women have been doing successfully since the earliest recorded times. Education is often the best antidote for the timid customer coupled with a certain assurance when recommending a particular treatment or product.

The principal methods in use are bleach-

ng, using a razor, depilatory cream or lotion, depilatory wax, tweezers and electrolysis.

Bleaching is most effective for small areas such as the upper lip and forearms where the hair is less coarse and more closely-growing; also for hair that is not so very dark. Remember, however, that the skin will be lightened as well—so, as with most new things, always advise a test area first to see the degree of lightening.

Going . . going . . gone

Using a razor is probably the quickest method of all, but as the hair is only removed at skin level, the regrowth will be fairly quick too! The rather furtive image of a woman secretly borrowing her husband's safety razor and slashing away merrily doesn't really apply in these days of dainty ladies' razors such as Nymph or the new one from Wilkinson Sword, the Cressida model. And the only result from dry shaving with a safety razor is usually sore, inflamed skin, so do recommend the use of an aerosol shaving cream to lubricate the skin first, and to use firm, upward strokes, not hurried stab-like movements which can only result in nicks and cuts. More elegant perhaps are the electric shavers, such as the Philips Lady Shave, which are effective when dealing with large areas, but they are not really suitable for very sensitive skins.

Tweezers are ideal for the odd couple of hairs—one well-known film star, however, was reported to have spent one afternoon plucking out the hairs on her legs one by one—not to be recommended! Emphasise the importance of keeping tweezers clean and the need to pluck in the direction of the hair growth.

Waxing away unwanted hair is a bit like going to the dentist—everyone has a different reaction and often it's not as bad as it's expected to be! Even so, it is perhaps not the most pleasant method to choose, but it is certainly effective—often lasting up to six to eight weeks. The heated wax is applied to the required area with a wooden spatula (experts recommend the use of talcum powder beforehand). When hardened (but not too much) the wax is ripped away with a firm, quick movement bringing the hair and root away with it. A soothing cream can be applied afterwards. Ardena wax depilatory and Adelaide Gray's Wax-A-Way are two products for home use, the wax being supplied in a small saucepan for heating purposes. Refills are available.

One of the most popular and easiest methods of depilation is to use one of the various creams and lotions on the market such as Immac, now presented in a more feminine pack from Anne French, Reckitt and Colman's Veeto which has recently been reformulated, Bu-To distributed by Mennen (UK) Ltd, Nair from Carter Wallace, Nudit Rinse-off Spray from Helena Rubinstein and hair remover for legs from Scholl (UK) Ltd, which all soften and dissolve the hair shaft. Application is simple, usually from a tube, jar or aerosol. The preparation is allowed to act for up to ten minutes (always read instructions carefully, as individual makes do vary slightly). The cream or lotion is then washed away with tepid water leaving the skin soft and smooth. Different formulations are some-

times available for the face or legs, although certain preparations such as Immac and Veeto are all of "facial quality"; and now virtually all depilatories include some pleasant fragrance. On no account, however, should a cream depilatory be applied to broken or irritated skin and do advise a skin test for the first timer.

Electrolysis is probably the most permanent method of all; it is certainly the most drastic. A fine needle is inserted into the hair follicle and then a dose of electricity run through it, which results in the destruction of the hair root by means of a weak DC current, but because of the enormous number of hair follicles in a small area, treatment—which should be carried out in a special salon by a qualified operator—can take quite a while. Even an experienced operator is said to only be able to deal with 25-100 hairs per session. Further details can be obtained through the Institute of Electrolysis, Lansdowne House, 251 Seymour Grove, Manchester 16.

Body fresh

Although we are now part of the Common Market, the European fashion for women to display long, luxurious underarm hair does not seem to be catching on here. Which is just as well when one considers how close perspiration and hair are linked! This is because ducts of most of the Apocrine glands (these are the sweat glands which exude a form of perspiration rich in organic matter) open into the hair follicles. Therefore no matter what is put under the arm the efficiency will probably be severely hampered by long hair. Which leads neatly into the next stage for the body beautiful—freshness.

Everyday washing or even a daily bath is just not enough to stop perspiration for any length of time, especially in the under-arm and genital areas. However, various misunderstandings still abound about perspiration, the function of perspiration and the role the deodorant or antiperspirant have to play. For instance, some people still believe it is harmful to stop perspiration. This isn't so. Sweat glands cover

the entire body, and by merely stopping perspiration in one area the temperature control mechanism that still operates over the other 90 per cent of the skin's surface will be unimpaired. This is what perspiration is—the body's way of controlling its own temperature. Fresh perspiration itself is almost pure, clear odourless water excreted by the three million tiny eccrine sweat glands distributed all over the body.

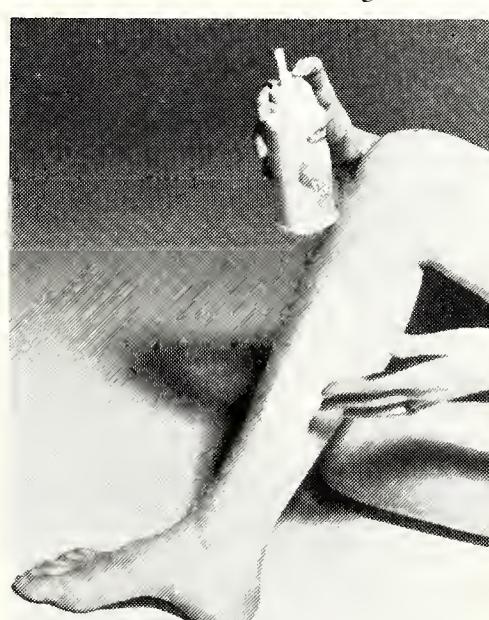
Apart from regulating the body's temperature, the purpose of the eccrine glands is to keep the skin moist and supple. These glands are active from birth and are most prevalent on the palms of hands, soles of feet, the forehead and scalp. The other type of sweat glands are the Apocrine which become active upon puberty, sometimes referred to as accessory sex glands, and are most prevalent in the underarm, pubic, abdominal and mammary areas. Unlike the ecerine glands, they don't serve any known useful purpose. However they do produce a milky viscous liquid make up of a complex of organic materials which is quickly decomposed by bacteria on the skin resulting in unpleasant body odour.

The most effective way of controlling the problem of wetness and axillary malodour is to use a product which contains an efficient antiperspirant agent to reduce the flow from the eccrine (all over) glands and an antibacterial agent to kill or inhibit the growth of bacteria. The principal products in use are a deodorant which immobilises the surface bacteria for short periods but does not stop wetness; and an antiperspirant which reduces odour and perspiration. These products are presented in various forms: roll-on sticks, deodorant sticks in gel form, powders, aerosol, creams, pads and the latest dry powder sprays. The active ingredient in an antiperspirant is usually an aluminium compound with a strongly astringent action. This is modified somewhat for stick antiperspirants. In a roll-on anti-perspirant such as Mum, Arrid, Odorono Sport, Cool Sure, Amplex and Fresh & Dry, the ingredient is dissolved in a base to aid quick drying. Most manufacturers also offer an aerosol variant which is basically the same formulation as the roll-on but said to be capable of drying faster.

The newest type of product is the dry powder variant such as Feel Free, Arrid and US which incorporate a talc propellant and have the advantage of drying on contact. For those with a more severe problem a product such as Mitchum anti-perspirant in cream, liquid and spray form or Linden Voss Extended Life can be effective.

Extra confidence

The vaginal deodorants may also be used as part of a woman's daily bathtime routine and to give extra confidence; normal vaginal secretions (like perspiration) have no odour and it is only when bacteria are present that the odour becomes unpleasant. A normal anti-perspirant would be much too harsh to apply to the delicate mucous membranes that surround the entrance to the vagina and that is why vaginal deodorants such as Bidex, Fresh 'n' Dainty, Femfresh, Elle, Mimospray, Freshette and FDS differ in their formulation by containing only a bacteriostat to prevent odour. Most of the deodorant preparations are also available in a sachet form.



Scholl's Hair Remover for legs seen in use. Simply spray on, leave for eight to ten minutes and rinse off. Always recommend a skin test for the first timer, or the woman changing makes.

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The BIG Plus

The Big Plus to your business

Wella Hair Sets are now even bigger business. They're in bigger sizes. The new 100cc packs line up with the 28cc range, in striking new labelling, and a massive advertising campaign. Once again, Wella will be the

bigest ever brand name advertising hair care in IPC magazines. Wella have the news, IPC have the readership. Together, we'll give a Big Plus to your business. Just display the Wella Sets, and watch them sell.

IPC Women's Magazines
where women get the message





ON THE BEACH

Accessories are just as important on the beach as in the town. Many a glamorous beach outfit has been spoiled by last year's shabby cast-offs. Here are a few accessories around at the moment which would look good on any beach.



Top left, are sunglasses 8337 from Polaroid, Rosanne House, Welwyn Garden City, Herts which have quality plastic frames and an unusual double-bridge effect.

□ Above, is the Sparkler (£1.05) swim cap from the Kleinert's collection, North Muirton Trading Estate, Perth, Scotland, which features multi-coloured flowers on a varied assortment of background colours.

□ The swimcap, centre, is also from the Kleinert range—Flower Power (£1.30), which has a bright array of flowers all around in multi and single colours: white, pink, lemon, lagoon.

□ Top right, two of the special Summer sunglass styles from Polaroid: model 8333 (£3.55) which has large shell frames with subtle tints and style 4210 (£3.00) which features new colour variations such as maize yellow or navy blue for the aviator style.



Above is model 6016 from The Irish Rubber Co Ltd, Kilcullen, co Kildare, Ireland which is a multi-coloured decorated cap with a small crown. Available in white, blue, sky, fluorescent red, fluorescent yellow and fluorescent green.

Bottom, centre, are two designs from the Piz Buin range of tan-through swimwear, from Natura Products, 90 Belsize Lane, London NW3. This range is made from Suntex which is specially woven with each thread the same distance from the next for letting the sun through. Piz Buin say that Suntex provides the skin with factor 5-6 protection, so apply Piz Buin Factor 5 or 6 lotion to the rest of the body. The sarong-type garments illustrated can be worn by either sex.



The three attractive bathing caps above are some of the latest models from the Haffenden-Richborough collection, Sandwich, Kent. They are, from left to right: Pyramid (£2.50) which has a cone-shaped crepe base available in blue/yellow, blue/green and pink/brown colourways; Bambi (£0.99) which comes in a choice of white/multi coloured centre, yellow/multi centre or light blue/multi centre; and Chic (£2.50) which is made of Trilobal nylon with a crepe base in orange, yellow and white stripes; blue, red and white stripes or blue, gold and white stripes.

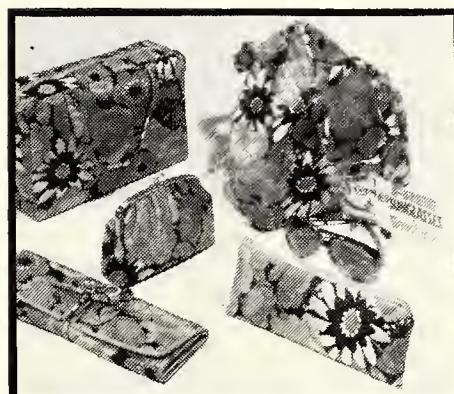
□ The quilted beach bag, centre, with the gay floral design is no 1870 (£0.69) from the range produced by Columbia Products Ltd, Sherbourne Avenue, Binstead, Ryde, IoW.



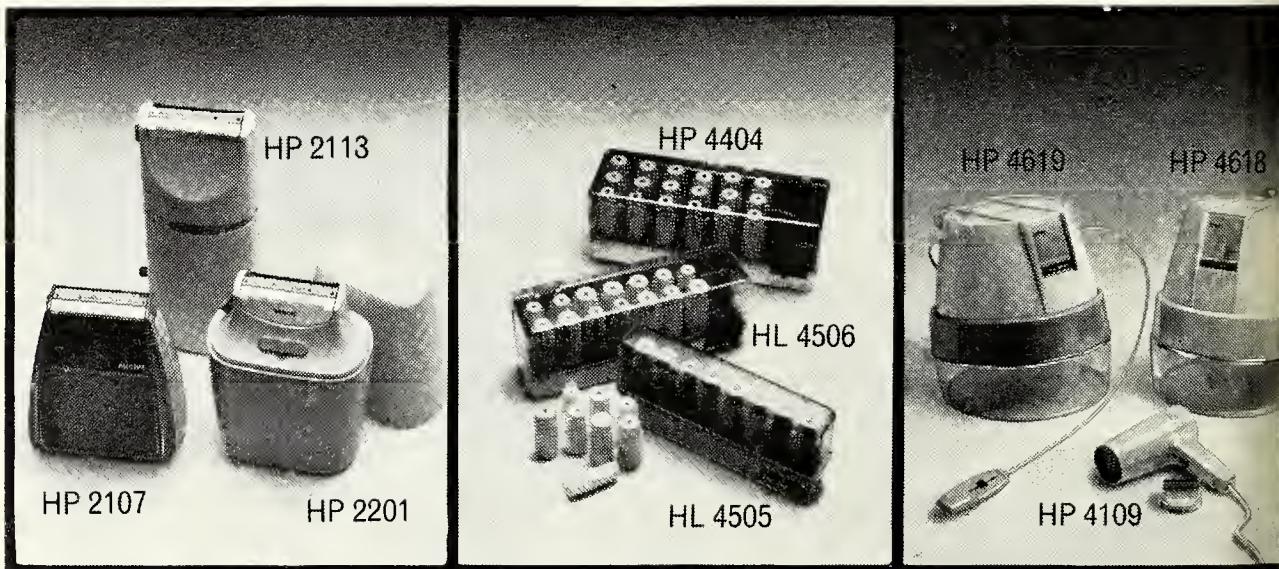
Bottom left, is Upside Downers (£1.95) from the Sunbrella range of Sunglasses, Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland.

Lenses and frames come in assorted pastel colours. □ Centre, is the Tropicana range of travel holdalls and cosmetics purses—also from Jackel & Co. Bottom centre, is the new insulated Thermosbag from Thermos Ltd, Brentwood, Essex, available in two sizes standard (£2.99) and large (£3.79) designed to keep food and drink cool and fresh for long periods.

□ And, below, is another design from the Sunbrella sunglasses collection: Aluminium (£2.95) with frames in matt black, silver grey or lilac and lenses in either brown, grey or lilac.



Our driers, curlers aren't doing a bit of good in



and Ladyshaves ing you this magazine.

The Philips ranges shown here have so much going for them,
here's only one real place for them:

Your shop.

Each product range offers your customers a wide choice. Let's take
closer look at them:

The three Hair Driers range from the hand-held model at £5.25, to
the Comfort Special Hood Hair Drier at £9.85.

The three Hair Curler sets range from £7.39 to £9.94.

And the three Ladyshaves range from £4.25 to £5.90.

Which simply means each range gives you three chances of making
a sale.

Two more products you can't afford to overlook either are the Hair
Clippers at £5.98 (HP2501), and the Untangler at £4.50 (HP4416
Hair and Massage Brush).

Now, what more could you ask for?

We want you to have the best.

Prices shown are suggested selling prices, inc VAT

PHILIPS

ALL ABOUT MASCARA

The function of mascara is to darken, curl and lengthen the wearer's own eyelashes to add depth and emphasis to the eye. The correct method of application is to close eye and colour lids from above using light, slow downward strokes.

History

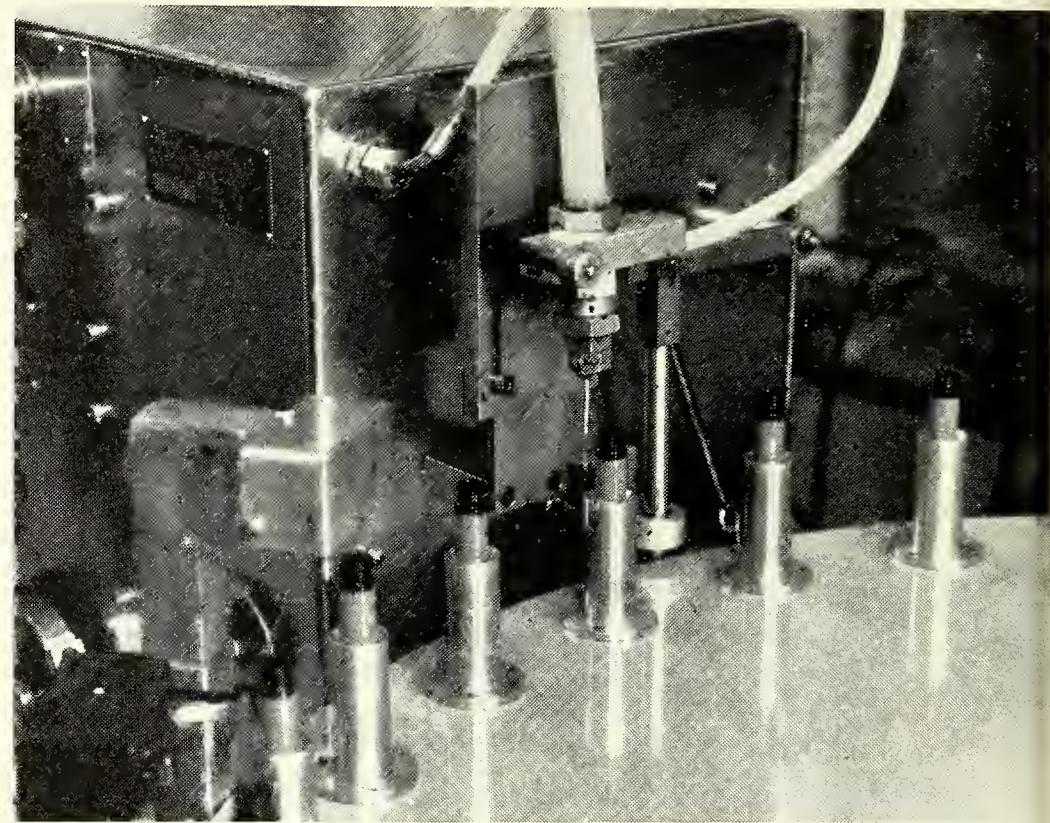
The earliest forms of mascara were soap based, pressed, caked, usually pigmented with carbon black. This cake mascara was subsequently improved by incorporating gums, wax, shellac, etc., to increase their water resistance. Cake mascara, which is still used, is applied by rubbing the wetted brush (unfortunately the old image of the user spitting into the block still applies!) until sufficient colour has been obtained and it is practically dry; whereby it is then stroked over the top lashes. A dry brush often has to be used afterwards to separate the lashes. From this was developed cream mascara which was easier to apply, although at one time cream mascara had to be applied by means of the fingers and consequently was then much less popular than the cake blocks. Replacing the water base by a solvent base gave a more water resistant product.

Recently, the emulsion type mascaras incorporating lash builders and extenders have become increasingly popular.

Major developments of package design led to the use of the "ready to apply" mascaras in a container which automatically left the correct amount of mascara on the applicator brush, giving a much cleaner operation.

Development

The development of a modern mascara involves incorporating many different desirable properties such as sterility, stability, ease of removal. The two properties of water resistance and ease of removal tend to conflict and most mascaras are a compromise where these two properties are concerned.



Mascara being filled hot at the Maybelline factory, Penarth Street, London SE15.

Production

Although the method of manufacture of solvent based "Cream" and "Emulsion" types are not the same, in all cases great care has to be taken in the incorporation of the pigments (and fibres if used) into the base. A fine and even dispersion must be achieved by a combination of efficient milling and mixing. The steps in the manufacture of a solvent based mascara are:

- 1) Solvent heated up and waxes and other base materials dissolved with stirring.
- 2) Preservatives added.
- 3) Pigments are mixed dry and milled in hammer mill.
- 4) Pigments are added to base and mixed until uniform.
- 5) Mascara checked for shade and adjusted if necessary.

- 6) Mascara cooled and solvent added to make up for that lost in processing.
- 7) Mascara milled at a setting of .002in and stored in airtight containers.
- 8) Mascara checked in laboratory for shade, physical characteristic and microbiology.

Whether the mascara is filled hot or cold, it is important to use a machine that will give a clean, even fill of automatic mascara packs.

Quality Control

One of the most important aspects of quality control is the microbiological testing which should be carried out on raw material, bulk mascara and at the beginning and end of each filling run.

Holiday check list from Yardley

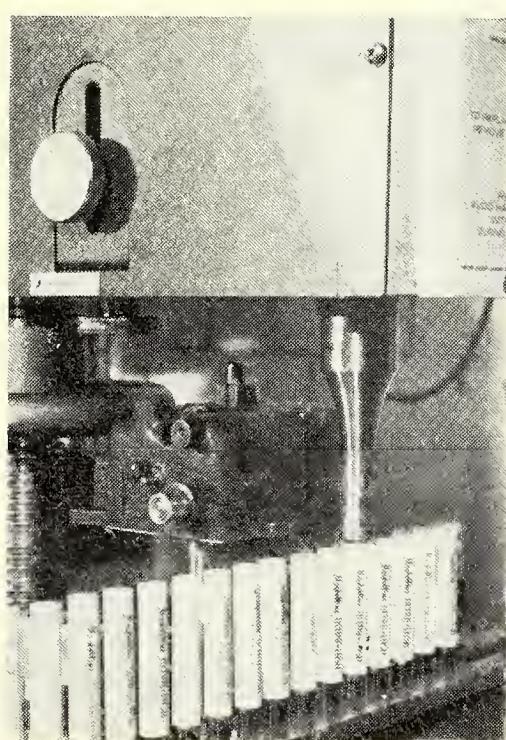
"Just in case" must be the most often repeated phrase this time of the year, with people cramming just about everything they can lay their hands in their seemingly shrinking suitcases. Lists are made and discarded with increasing impatience as some member of the family decides they couldn't possibly go without their . . . or their . . . and so on! To sort a path through this confusion, Yardley are offering a comprehensive travel bag checklist to those who are planning a trip. Whether overnight or a four-day stint, around the corner or 500 miles away, the same amount of care and thought needs to go into the planning of what to pack.

Even those practised in the art of flinging a few things into a bag can come unstuck. Some basics must never be forgotten. No good remembering the toothpaste if you forget the toothbrush!

Every list is bound to be a little different. Bra-burners may happily dispense with their undegear and other sundry items. Country stompers need stout shoes and snuggly coats. Those searching for trouble free cosmetics should take a good look at the new Yardley Nature Lipids Skin Care range. Because the containers are streamlined and unbreakable, they transfer straight from bag to dressing table. All the products contain the new lipids formula which, in a nutshell, helps the skin maintain its own moisture balance.

Also useful for travel bags—miniature aerosol perfumes in six different fragrances, Yardley's travel size talcs, soaps and cream moisturiser.

Copies can be had from the Public Relations Dept, Yardley of London Ltd, 33 Old Bond Street, W1. (Please enclose a stamped self-addressed envelope).



Welding on of mascara barrels

SHOWING OFF....



Beecham Products have created a window display with a summer theme for this issue of *Beauty Business* taking full advantage of the holiday season to produce what they call a "prospective holiday-makers' shopping list". To back this up the odd holiday item like posters, beach balls, buckets and spades—even a swimsuit and bathing cap can be added for extra effect.

Holidays mean fun and relaxation but they can also mean different or unusual food, a new bed, an overdose of sun, unaccustomed exercise; in fact, an abrupt change from the usual routine. With this

in mind women everywhere will be buying various toiletries and remedies for trouble-free holidays and picnic outings so include preparations for upset stomachs, headaches and additional articles like insect repellants. Falls and accidents can happen everywhere, so plasters and simple first aid items can also be displayed to remind the shopper. Small products, however, like the plasters and sachets, can easily become lost in a large window so Beechams have pinned their selection into a backdrop.

Everyday articles such as toothpaste and deodorants are often expensive to buy

abroad so a wide selection should be included, particularly the smaller sizes which are often preferred for travelling.

As most families includes a toddler, then products which facilitate travelling such as Beecham's All Fresh Baby Bottom Wipes are a must; also the cleansing tissues and pads for adults.

Hair should not be forgotten either. Swimming and the sun are very hard on hair of all ages and a display of the large variety of shampoos, conditioners and hair-sprays available will help shoppers make the right choice.

YOU'LL BE SELLING NOW

For fragrance

J. GROSSMITH White Fire

Selling peg: A three note perfume being promoted "as costing much less than an expensive perfume".

Price: 3cc handbag size £0.39, 6cc £0.72, 12cc £1.32, 28cc Eau de toilette £0.49, 21cc cream perfume £0.77, 25g cologne mist £0.55, 50g cologne mist £0.88, bath cubes (packs of six) £0.28, 110g talc £0.33 and toilet soap (box of three) £0.49.

4711 Deocologne

Selling peg: A dual product which combines cologne with the protection of a deodorant or anti-perspirant ingredient available as either Deocologne deo-spray with a choice of two fragrances or Deocologne anti-perspirant.

Price: £0.66.

BRONNLEY Morning Glory range

Selling peg: Morning Glory fragrance, which is basically flowery, added to range of Turtle Oil toiletries.

Price: According to item.



For bathtime

DANA Tabu range

Selling peg: A bathtime range with the Tabu fragrance packaged in black, white and gold packs. Two of the packs have been treated with anti-static to avoid dust. **Price:** Foam bath £1.50, body lotion £1.50, bath soap £0.47.

For skincare

INNOXA Pause

Selling peg: Versatile skin cream which acts as either moisturiser under make-up or nourishing cream at night. Has no oil content so is non-greasy.

Price: £0.88.

MAX FACTOR California Avocado Lemon Toner

Selling peg: A sparkling green toning lotion with natural avocado oil and scented with lemons which removes cleansing cream and both stimulates and refines the skin.

Price: £0.70.

For eyes

MAX FACTOR California eye makers

Selling peg: A collection of six colour-toned duets of pressed powder eye shadow. Each compact contains two shades, one frosted and one plain plus a telescopic applicator.

Price: £0.55.

MARY QUANT False eyelashes

Selling peg: Three new "more natural" styles of lashes: Feather Softs, Super Softs and Lower Softies.

Price: According to style.



For lips

OUTDOOR GIRL Lipstick

Selling peg: An automatic lip brush incorporating a gloss formula in the barrel.

Price: £0.39.

MAX FACTOR California Cheek 'n' Lip Glossers

Selling peg: A collection of four bright glossers to be used on either lips or cheeks.

Price: £0.50.

HELENA RUBINSTEIN Le Lipstick

Selling peg: Three new shades added to Le Lipstick range: Devil Red, Vibrant Orange and Lively Mocca.

Price: £0.68.

For the sun

OUTDOOR GIRL Tanfantastic Xtra Lotion

Selling peg: A "double strength" fake tanning lotion that is moisturising and also contains a sun screen.

Price: £0.49.

INNOXA Kerodex 12W

Selling peg: Kerodex 12W Total Sun Deflectant Cream "cuts out an even wider spectrum of the sun's harmful rays" than 11D and previous 12W creams.

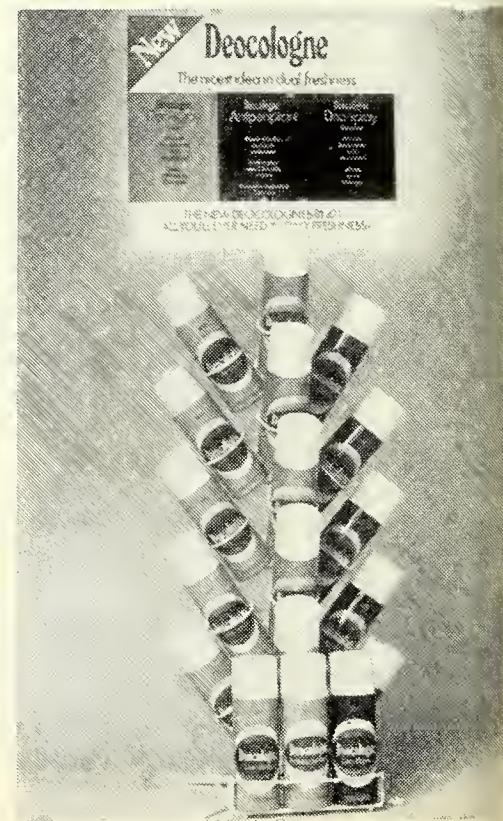
Price: £0.44.

For men

GALA Agua Brava

Selling peg: A range of exclusive products for men comprising shaving, bath and grooming items from Antonio Puig S.A. of Barcelona.

Price: According to item.





TAKE A BLUE GUIDE WITH

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all blue guides are
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maps and town plans

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Editor: Stuart Rossiter

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Better business with Benn

Benn Brothers Limited, 25 New Street Square, London EC4A 3JA

Benn 

The Benn logo consists of the brand name 'Benn' in a bold, sans-serif font, followed by a stylized double arrow symbol pointing to the right, composed of two V-shaped lines meeting at a point.

18 million holiday makers will thank you for reading this advertisement.

That's how many suffered from sunburn on holiday in 1972 even though they may have used an existing suntan preparation.

Because until now there has not been a really effective sunburn preventative.

Now there is.

It is called Sylvasun.

Everyone has a natural skin protective reaction against the burning rays of the sun, but in many people it builds up too slowly to prevent burning.

Sylvasun are vitaminised tablets that help prevent the miseries of sunburn by speeding up the body's own natural defences against the sun.

When exposed to intensive sunshine, the skin responds to the ultra-violet radiation in two ways.

It produces the dark pigment, melanin, which shows as a tan, and it thickens itself into a more efficient protective layer.

The Vitamin A in Sylvasun accelerates this thickening effect, and the calcium ingredient indirectly promotes melanin formation.

As reported in the Practitioner in May 1971, Sylvasun has been successfully tested on 1600 BOAC/BEA airline employees.

Of those persons who had suffered severely or moderately from sunburn in the past, 90 per cent were improved after taking Sylvasun.

Additionally, Sylvasun has been used to good effect by a wide variety of sportsmen, including our Olympic athletes, the English World Cup Football team in Mexico, 1970, and the MCC teams touring abroad.

This year, so that these 18 million holidaymakers will know about Sylvasun before they enter your shop, we are spending more money advertising it on television than has ever been spent on a sun preparation before.

We're also taking full colour pages in holiday brochures.

And display material along with window and till stickers are all available.

And there are special bonuses which can give you a profit of over 50 per cent.

So your customers won't be the only people pleased that you've read this advertisement.



**Sylvasun.
Helps stop you burning while you tan.**

Chefaro Proprietaries Limited, Crown House, Morden, Surrey. 01-542 3402.